TSD File Inventory Index

Date. *June 18, 2004*

Initial *[illegible]*

Facility Name *Methode Electronics Inc. (Interconnect Product Division One Fellowsite)*

Facility Identification Number *ILD 046 579 488*

A.1 General Correspondence		**B.2 Permit Docket (B.1.2)**	✓
A.2 Part A / Interim Status	✓	1 Correspondence	✓
1 Correspondence	✓	2 All Other Permitting Documents (Not Part of the ARA)	
2 Notification and Acknowledgment	✓	**C.1 Compliance - (Inspection Reports)**	
3 Part A Application and Amendments	✓	**C.2 Compliance/Enforcement**	✓
4 Financial Insurance (Sudden, Non Sudden)		1 Land Disposal Restriction Notifications	
5 Change Under Interim Status Requests		2 Import/Export Notifications	
6 Annual and Biennial Reports		**C.3 FOIA Exemptions - Non-Releasable Documents**	
A.3 Groundwater Monitoring		**D.1 Corrective Action/Facility Assessment**	
1 Correspondence		1 RFA Correspondence	
2 Reports		2 Background Reports, Supporting Docs and Studies	
A.4 Closure/Post Closure	✓	3 State Prelim. Investigation Memos	
1 Correspondence	✓	4 RFA Reports	
2 Closure/Post Closure Plans, Certificates, etc		**D. 2 Corrective Action/Facility Investigation**	
A.5 Ambient Air Monitoring		1 RFI Correspondence	
1 Correspondence		2 RFI Workplan	
2 Reports		3 RFI Program Reports and Oversight	
B.1 Administrative Record		4 RFI Draft /Final Report	

Total - 1

5 RFI QAPP		7 Lab data Soil Sampling/Groundwater	
6 RFI QAPP Correspondence		8 Progress Reports	
7 Lab Data, Soil-Sampling/Groundwater		**D.5 Corrective Action/Enforcement**	
8 RFI Progress Reports		1 Administrative Record 3008(h) Order	
9 Interim Measures Correspondence		.2 Other Non-AR Documents	
10 Interim Measures Workplan and Reports		**D.6 Environmental Indicator Determinations**	
D.3 Corrective Action/Remediation Study		.1 Forms/Checklists	
1 CMS Correspondence		**E. Boilers and Industrial Furnaces (BIF)**	
.2 Interim Measures		.1 Correspondence	
.3 CMS Workplan		.2 Reports	
.4 CMS Draft/Final Report		**F Imagery/Special Studies** (Videos, photos, disks, maps, blueprints, drawings, and other special materials.)	
.5 Stabilization		**G.1 Risk Assessment**	
.6 CMS Progress Reports		.1 Human/Ecological Assessment	
.7 Lab Data, Soil-Sampling/Groundwater		.2 Compliance and Enforcement	
D.4 Corrective Action Remediation Implementation		.3 Enforcement Confidential	
1 CMI Correspondence		.4 Ecological - Administrative Record	
.2 CMI Workplan		.5 Permitting	
3 CMI Program Reports and Oversight		.6 Corrective Action Remediation Study	
4 CMI Draft/Final Reports		.7 Corrective Action/Remediation Implementation	
5 CMI QAPP		.8 Endangered Species Act	
6 CMI Correspondence		.9 Environmental Justice	

Note Transmittal Letter to Be Included with Reports
Comments Documents do not justify individual folder per schedule!

A.2 Part A/
Interim Status

This site is exempt from the requirement to file the 1989 Hazardous Waste Report because:

- the site was not a RCRA Large Quantity Generator in 1989,

  AND

- the site did not treat, store, or dispose of RCRA hazardous wastes on site in units subject to RCRA permitting requirements in 1989.

It is expected that this site will remain exempt from the requirement to file the Hazardous Waste Report:

Check one:

- ☐ For 1989 only
- ☒ Permanently
- ☐ Other (Explain: _____)

3/9/92

EPA ID | I | L | D | 0 | 4 | 6 | 5 | 7 | 9 | 4 | 8 | 8 |

Site Name Methode Electronics, Inc., Interconnect Products Division

Site Location Address 1700 Hicks Rd., Rolling Meadows, IL 60008

Site Location Address _____

Contact Name: Shari A. Swiger

Phone Number of Contact (708) 392-3500

UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY
REGION V
230 SOUTH DEARBORN ST.
CHICAGO, ILLINOIS 60604

REPLY TO ATTENTION OF:
RCRA ACTIVITIES

MAY 14 1982

Philip Kowalski, Production Supervisor
Methode Electronics Inc.-Interconnect Products Div.
1700 Hicks Road
Rolling Meadows, IL 60008

RE: Interim Status Acknowledgement USEPA ID No. ILD-046-579-488
FACILITY NAME: Methode Electronics Inc.-Interconnect Products Div.
1700 Hicks Road, Rolling Meadows, IL

Dear Mr. Kowalski:

This is to acknowledge that the U.S. Environmental Protection Agency (USEPA) has completed processing your Part A Hazardous Waste Permit Application. It is the opinion of this office that the information submitted is complete and that you, as an owner or operator of a hazardous waste management facility, have met the requirements of Section 3005(e) of the Resource Conservation and Recovery Act (RCRA) for Interim Status. However, should USEPA obtain information which indicates that your application was incomplete or inaccurate, you may be requested to provide further documentation of your claim for Interim Status. Our opinion will be reevaluated on the basis of this information.

As an owner or operator of a hazardous waste management facility, you are required to comply with the interim status standards as prescribed in 40 CFR Parts 122 and 265, or with State rules and regulations in those States which have been authorized under Section 3006 of RCRA. In addition, you are reminded that operating under interim status does not relieve you from the need to comply with all applicable State and local requirements.

The printout enclosed with this letter identifies the limit(s) of the process design capacities your facility may use during the interim status period. This information was obtained from your Part A Permit application. If you wish to handle new wastes, to change processes, to increase the design capacity of existing processes, or to change ownership or operational control of the facility, you may do so only as provided in 40 CFR Sections 122.22 and 122.23.

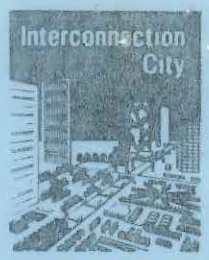
As stated in the first paragraph of this letter, you have met the requirements of 40 CFR Part 122.23; your facility may operate under interim status until such time as a permit is issued or denied. This will be preceded by a request from this office or the State (if authorized) for Part B of your application. Please contact Arthur Kawatachi of my staff at (312) 886-7449, if you have any questions concerning this letter or the enclosure.

Sincerely yours,

Karl J. Klepitsch, Jr., Chief
Waste Management Branch

Enclosure
cc: M. G. Andre, Vice-President

Methode Electronics, Inc.



INTERCONNECT PRODUCTS DIVISION
1700 HICKS ROAD
ROLLING MEADOWS, ILLINOIS 60008 USA
TWX 910-687-0760
PHONE: 312-392-3500

ILDO 46579488 JMB

G, TSD, PA

Illinois E.P.A.
1701 S. First Street
Maywood, Illinois 60153

Dear Mr. Bechely:

Thank you for your and Mr. Sternard's help in determining that Methode Electronics, Rolling Meadows is a small quantity generator. After reviewing our shipping manifests and present accumulation of spent solvents, I've found that in the last 23 calander months we have generated only 825 kg. of Methlyene Chloride and 275 kg. of 1-1-1-trichloroethane. By shipping these spent solvents and ferric chloride (of which we presently have no accumulation,) every 90 day period, we will easily comply with the small quantity generator requirements of 40 CFR 261.5.

We ship our spent solvents to McKesson Chemical Co. Site No. 20103027 or Site No. 03148901. We ship our spent ferric chloride to Circuit Board Supplies Inc. (Triple S Etchants) Site No. 04341404. Please withdraw our E.P.A. form 3510.

Sincerely,

Philip Kowalski

pk
cc USEPA REG V
CB
MA

RCRA ACTIVITIES

Mr. Philip Kowalski, Prod. Super.
METHODE ELECTRONICS INC.
1708 Hicks Rd.
Rolling Meadows, IL. 60008

RE: Request for Information-Hazardous Waste Permit Review
(Small Quantity Generator)
FACILITY NAME: METHODE ELECTRONICS INC
USEPA ID NO.: ILD 046 579 488

Dear Mr. Kowalski:

This is to acknowledge that the United States Environmental Protection Agency has completed reviewing your Part A Hazardous Waste Permit Application. Our review indicates your facility may not require a permit under §3005 of the Resource Conservation and Recovery Act; however, further clarification is needed.

Based on the information submitted, your facility appears to qualify as a small quantity generator as defined in 40 CFR Part 261.5 (enclosed). Please review these requirements to determine if your facility qualifies as a small quantity generator from November 19, 1980 to the present. If it does, a permit is not required and you should withdraw your permit application. Please submit your determination in writing, signed and certified by an authorized person in accordance with 40 CFR Part 122.6 (enclosed), requesting that your application be withdrawn. If at any time, since November 19, 1980, your operation (1) did not qualify for the special requirements for generators of small quantities of hazardous wastes, and (2) included treatment, storage, or disposal of hazardous waste subject to 40 CFR Part 265, a closure plan must be filed with the withdrawal request. Requirements for closure are found at 40 CFR Part 265 Subpart 6.

If the information on your application is incorrect, please submit a revised Part A with the appropriate changes to this Regional Office. If no response is received in this office within ~~60~~ 30 days, we will assume your facility requires a permit. Accordingly, we will continue to process your application.

If you have any questions, please do not hesitate to contact the Technical, Permits, and Compliance Section at (312) 353-2197 for assistance. Please refer to "Request for Information, Small Quantity Generator" in all telephone contacts and correspondence.

Sincerely yours,

OK
DH
8/11/82

Karl J. Klepitsch, Jr., Chief
Waste Management Branch

Enclosures cc: Mr. M. G. Andre, V.P.

EPA

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act *(RCRA)*. Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER ➤ • ILD046579488 REACKNOWLEDGEMENT

METHODE ELECTRONICS INC
1700 HICKS RD
ROLLING MEADOWS IL 60008

INSTALLATION ADDRESS ➤

1700 HICKS ROAD
ROLLING MEADOWS IL 60008

EPA Form 8700-12B (4-80)

09/28/81

Please print or type with ELITE type (12 characters/inch) in the unshaded areas only.

Form Approved OMB No. 158-S79016
GSA No. 0246-EPA-OT

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.: ~~ILD045679488~~ ILD 046579488 Key to say

I. NAME OF INSTALLATION: METHODE ELECTRONICS INC

II. INSTALLATION MAILING ADDRESS: 1700 HICKS RD, ROLLING MEADOWS, IL 60008

III. LOCATION OF INSTALLATION: 1700 HICKS RD, ROLLING MEADOWS, IL 60008

002751 AUG 25 80

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

FOR OFFICIAL USE ONLY

COMMENTS

C

INSTALLATION'S EPA I.D. NUMBER: ILD046579488 (~~ILD045679488~~) T/A C: 1

APPROVED: A

DATE RECEIVED (yr., mo., & day): 800818

I. NAME OF INSTALLATION

Methode Electronics Inc.

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX: 1700 Hicks Road

CITY OR TOWN: Rolling Meadows | ST.: IL | ZIP CODE: 60008

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER: 1700 Hicks Road

CITY OR TOWN: Rolling Meadows | ST.: IL | ZIP CODE: 60008

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title): Kowalski Philip Production Superv

PHONE NO. (area code & no.): 312-392-3500

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER: Methode Electronics Inc.

B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

F = FEDERAL
M = NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

- [X] A. GENERATION
- [ ] B. TRANSPORTATION (complete item VII)
- [X] C. TREAT/STORE/DISPOSE
- [ ] D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only – enter "X" in the appropriate box(es))

- [ ] A. AIR
- [ ] B. RAIL
- [ ] C. HIGHWAY
- [ ] D. WATER
- [ ] E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

- [x] A. FIRST NOTIFICATION
- [ ] B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.: ILD046579488

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

EPA Form 8700-12 (6-80)

AUG 20 1980

CONTINUE ON REVERSE

I.D. – FOR OFFICIAL USE ONLY

S												T/A	C
W	I	L	D	0	4	6	5	7	1	4	3	8	2	1
1	2										13	14	15

IX. DESCRIPTION OF HAZARDOUS WASTES *(continued from front)*

A. HAZARDOUS WASTES FROM NON–SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.31 for each listed hazardous waste from non–specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F 0 0 1					
7	**8**	**9**	**10**	**11**	**12**

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	**20**	**21**	**22**	**23**	**24**
25	**26**	**27**	**28**	**29**	**30**

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four–digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
U 2 2 6	U 0 8 0				
37	**38**	**39**	**40**	**41**	**42**
43	**44**	**45**	**46**	**47**	**48**

D. LISTED INFECTIOUS WASTES. Enter the four–digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. CHARACTERISTICS OF NON–LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non–listed hazardous wastes your installation handles. *(See 40 CFR Parts 261.21 – 261.24.)*

☐ 1. IGNITABLE (D001) ☒ 2. CORROSIVE (D002) ☐ 3. REACTIVE (D003) ☐ 4. TOXIC (D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE *(type or print)*	DATE SIGNED
Philip Kowalski	Philip Kowalski Production Supervisor	8-15-80

DETACH A

DETACH A

Please print or type with ELITE type (12 characters/inch) in the unshaded areas only.

Form Approved OMB No. 158-S79016
GSA No. 0246-EPA-OT

U.S. ENVIRONMENTAL PROTECTION AGENCY

EPA NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law *(Section 3010 of the Resource Conservation and Recovery Act)*.

I. INSTALLATION'S EPA I.D. NO.: ILD046579488

A. NAME OF INSTALLATION: METHODE ELECTRONICS INC

II. INSTALLATION MAILING ADDRESS: 1700 HICKS RD ~~ARLINGTON HTS.~~ Rolling Meadows IL 60008

III. LOCATION OF INSTALLATION: 1700 HICKS RD ~~ARLINGTON HTS.~~ Rolling Meadows IL 60008

DETACH

FOR OFFICIAL USE ONLY

COMMENTS (C)

INSTALLATION'S EPA I.D. NUMBER (F): ILD046579488 (C) 1

APPROVED: A

DATE RECEIVED (yr., mo., & day): 880627

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX (3)

CITY OR TOWN (4): ROLLING MEADOWS — ST.: IL — ZIP CODE: 60008

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER (5)

CITY OR TOWN (6): ROLLING MEADOWS — ST.: IL — ZIP CODE: 60008

IV. INSTALLATION CONTACT

NAME AND TITLE *(last, first, & job title)* (2): KOWALSKI PHILIP PRODUCTION SUP

PHONE NO. *(area code & no.)*: 312-392-3500

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER (8): METHODE ELECTRONICS INC

B. TYPE OF OWNERSHIP *(enter the appropriate letter into box)*: F = FEDERAL, M = NON-FEDERAL

VI. TYPE OF HAZARDOUS WASTE ACTIVITY *(enter "X" in the appropriate box(es))*

- [X] A. GENERATION
- [ ] B. TRANSPORTATION *(complete item VII)*
- [ ] C. TREAT/STORE/DISPOSE
- [ ] D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION *(transporters only — enter "X" in the appropriate box(es))*

- [ ] A. AIR
- [ ] B. RAIL
- [ ] C. HIGHWAY
- [ ] D. WATER
- [ ] E. OTHER *(specify)*:

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. Number in the space provided below.

- [X] A. FIRST NOTIFICATION
- [ ] B. SUBSEQUENT NOTIFICATION *(complete item C)*

C. INSTALLATION'S EPA I.D. NO.: ILD046579488

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

FOR OFFICIAL USE ONLY

															T/A	C
W	I	L	D	0	4	6	5	7	9	4	8	8			2	1
1	2												13	14	15	

IX. DESCRIPTION OF HAZARDOUS WASTES *(continued from front)*

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
U226					
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
U226	U080				
37	38	39	40	41	42
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. *(See 40 CFR Parts 261.21 – 261.24.)*

☐ 1. IGNITABLE (D001) ☐ 2. CORROSIVE (D002) ☐ 3. REACTIVE (D003) ☐ 4. TOXIC (D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE *(type or print)*	DATE SIGNED
	Philip Kowalski Production Supervisor	6-24-80

EPA Form 8700-12 (6-80) REVERSE

DETACH

DETACH

Please print or type in the unshaded areas only
(fill—in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-R0175 96

FORM 1 GENERAL

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

S																	T/A	C
F	I	L	D	0	4	6	5	7	9	4	8						X	D
1	2															13	14	15

LABEL ITEMS

I. EPA I.D. NUMBER

II. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill—in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill—in area*(s)* below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold—faced terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED	SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a **discharge** to **waters of the U.S.**? (FORM 2A)		X		B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge** to **waters of the U.S.**? (FORM 2B)		X	
	16	17	18		19	20	21
C. Is this a facility which currently results in **discharges** to **waters of the U.S.** other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility *(other than those described in A or B above)* which will result in a **discharge** to **waters of the U.S.**? (FORM 2D)		X	
	22	23	24		25	26	27
E. Does or will this facility treat, store, or dispose of **hazardous wastes**? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	X		
	28	29	30		31	32	33
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
	34	35	36		37	38	39
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment** area? (FORM 5)		X	
	40	41	42		43	44	45

III. NAME OF FACILITY

3 1 SKIP METHODE ELECTRONICS INC INTRCNCT PROD DIVIS

IV. FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*	B. PHONE *(area code & no.)*		
2 KOWALSKI PHILIP PROD SUPERVISR	312	392	3500

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX	B. CITY OR TOWN	C. STATE	D. ZIP CODE
3 1700 HICKS ROAD	4 ROLLING MEADOWS	IL	60008

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER	B. COUNTY NAME
5 1700 HICKS ROAD	COOK

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE *(if known)*
6 ROLLING MEADOWS	IL	60008	031

P2. 4/22

NOV 14 1990

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST: 3643 (specify) Solvents from degreasing, acidic copper&tin bearing sludge-chem.milling

B. SECOND: (specify)

C. THIRD: (specify)

D. FOURTH: (specify)

VIII. OPERATOR INFORMATION

A. NAME: METHODE ELECTRONICS INCORPORATED

B. Is the name listed in Item VIII-A also the owner? [X] YES [ ] NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)
F = FEDERAL
S = STATE
P = PRIVATE
M = PUBLIC (other than federal or state)
O = OTHER (specify)
P (specify)

D. PHONE (area code & no.): 312 392 3500

E. STREET OR P.O. BOX: 1700 HICKS ROAD

F. CITY OR TOWN: ROLLING MEADOWS

G. STATE: IL

H. ZIP CODE: 60008

IX. INDIAN LAND

Is the facility located on Indian lands? [ ] YES [X] NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)

D. PSD (Air Emissions from Proposed Sources): P

B. UIC (Underground Injection of Fluids): U

E. OTHER (specify) (specify)

C. RCRA (Hazardous Wastes): R

E. OTHER (specify) (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements. F9: B/5¢

XII. NATURE OF BUSINESS (provide a brief description)

F9: A/5¢

Methode Electronics, Interconnect Products Division, produces electrical connecting systems, ranging in size from small plug-in connectors to large bus bars.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
M. G. Andre, Vice-President	M G Andre	11/14/80

COMMENTS FOR OFFICIAL USE ONLY

C

(fill-in areas are spaced for elite type, i.e., 12 characters/inch). Form Approved OMB No. 158-S80004 96

FORM 3 RCRA — EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
HAZARDOUS WASTE PERMIT APPLICATION
Consolidated Permits Program
(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

S		T/A	C
F	I L D 0 4 6 5 7 9 4 8 8	3	1

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

[ ] 2. NEW FACILITY *(Complete item below.)*

C	YR.	MO.	DAY
8	74	09	05

FOR EXISTING FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

YR.	MO.	DAY

FOR NEW FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR IS EXPECTED TO BEGIN

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[ ] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.
1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	D	HECTARE-METER	F
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES	B
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES	Q
GALLONS PER DAY	U	LITERS PER HOUR	H		

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below):* A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

S		T/A	C
C	DUP	3	1

LINE NUMBER	A. PROCESS CODE (from list above)	B.1. AMOUNT (specify)	B.2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B.1. AMOUNT	B.2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
~~X-1~~	~~S 0 2~~	~~600~~	~~G~~		5				
~~X-2~~	~~T 0 3~~	~~20~~	~~E~~		6				
1	S 0 1	1705000	G		7				
2					8				
3					9				
4					10				

Continued from page 2.
NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)

S												T/A	C
W	I	L	D	0	4	6	5	7	9	4	8	8	3	1
1	2										13	14	15	

FOR OFFICIAL USE ONLY

S													T/A	C				
W	D	U	P										3	2	D	U	P	
1	2											13	14	15	23			26

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D002	~~1300000~~ 1082900	~~P~~ K	S01	
2	U226	~~825000~~ 687250	~~P~~ K	S01	
3	U080	~~770000~~ 641400	~~P~~ K	S01	
4					
5					
6					
7					
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26					

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

(enter "A", "B", "C", etc. behind the "3" to identify photocopied pages)

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTE (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE

EPA I.D. NO. (enter from page 1)

S												T/A	C
F	I	L	D	0	4	6	5	7	9	4	8	8	3	6
1	2										13	14	15

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).* F6: A155

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground–level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).* F6: A156

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)									LONGITUDE (degrees, minutes, & seconds)								
4	5	0	5	0	2	8	28	0	0	8	8	0	2	0	0	0	
65	66	67	68	69	-	71			72	-	74	75	76	77	-	79	

VIII. FACILITY OWNER

☑ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below. ok

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
C E METHODE ELECTRONICS INCORPORATED ok	312-392-3500
15 16 - 55	56 - 58 59 - 61 62 - 65

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
C H 1700 HICKS ROAD ok	C G ROLLING MEADOWS	IL	60008 ok
15 16 - 45	47 - 48	49 50	51 - 55

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
M. G. Andre	M G Andre	11/14/80

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED

IJOU

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-R0175 96

FORM 1 GENERAL

ENVIRONMENTAL PROTECTION AGENCY
GENERAL INFORMATION
Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F ILD045794888

LABEL ITEMS
- I. EPA I.D. NUMBER
- III. FACILITY NAME
- V. FACILITY MAILING ADDRESS
- VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of **bold-faced** terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a discharge to waters of the U.S.? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X	
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of **hazardous wastes**? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	X		
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP: METHODE ELECTRONICS INTRCNCT PROD DIVIS

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 KOWALSKI PHILIP PROD SUPERVISR	312 392 3500

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX	B. CITY OR TOWN	C. STATE	D. ZIP CODE
3 1700 HICKS ROAD	4 ROLLING MEADOWS	IL	60008

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER	B. COUNTY NAME
F 1 1700 HICKS ROAD	COOK

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
6 ROLLING MEADOWS	IL	60008	031

BGS 2-19-82

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST: 3643 (specify) Solvents from degreasing, acidic copper&tin bearing sludge-chem.milling

B. SECOND: (specify)

C. THIRD: (specify)

D. FOURTH: (specify)

VIII. OPERATOR INFORMATION

A. NAME: METHODE ELECTRONICS INCORPORATED

B. Is the name listed in Item VIII-A also the owner? [X] YES [ ] NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)
F = FEDERAL; M = PUBLIC (other than federal or state); S = STATE; O = OTHER (specify); P = PRIVATE
P (specify)

D. PHONE (area code & no.): A 312 392 3500

E. STREET OR P.O. BOX: 1700 HICKS ROAD

F. CITY OR TOWN: ROLLING MEADOWS

G. STATE: IL

H. ZIP CODE: 60008

IX. INDIAN LAND
Is the facility located on Indian lands? [ ] YES [X] NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water): N

D. PSD (Air Emissions from Proposed Sources): P

B. UIC (Underground Injection of Fluids): U

E. OTHER (specify): (specify)

C. RCRA (Hazardous Wastes):

E. OTHER (specify): (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements. F9: B/50

XII. NATURE OF BUSINESS (provide a brief description)

F9: A/51

Methode Electronics, Interconnect Products Division, produces electrical connecting systems, ranging in size from small plug-in connectors to large bus bars.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
M. G. Andre, Vice-President	M. G. Andre	11/14/80

COMMENTS FOR OFFICIAL USE ONLY

C

Please print or type in the unshaded areas only
(fill—in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004 96

FORM 3 RCRA — EPA — U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

F | I L D 0 4 6 5 7 9 4 8 8 3

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

[ ] 2. NEW FACILITY *(Complete item below.)*

C 8 — YR. 74 MO. 09 DAY 05 — FOR EXISTING FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

YR. ___ MO. ___ DAY ___ — FOR NEW FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR IS EXPECTED TO BEGIN

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[ ] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code*(s)* in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.

1. AMOUNT — Enter the amount.
2. UNIT OF MEASURE — For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	D	HECTARE-METER	F
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES	B
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES	Q
GALLONS PER DAY	U	LITERS PER HOUR	H		

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C | DUP | T/A 3 | C 1

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
~~X-1~~	~~S 0 2~~	~~600~~	~~G~~	
~~X-2~~	~~T 0 3~~	~~20~~	~~E~~	
1	S 0 1	1705000	G	
2				
3				
4				
5				
6				
7				
8				
9				
10				

Continued from page 2.
NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)

W	I	L	D	0	4	6	5	7	9	4	8	8	3	1

FOR OFFICIAL USE ONLY

W	DUP	3	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D002	130000	G	S01	
2	U226	8250000	G	S01	
3	U080	770000	G	S01	
4					
5					
6					
7					
8					
9					
10					
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25					
26					

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

(enter "A", "B", "C", etc. behind the "3" to identify photocopied pages)

Continued from the front.

III. PROCESSES *(continued)*

C. SPACE FOR ADDITIONAL PROCESS CODES OR DESCRIBING OTHER PROCESSES *(code "T[illegible])*. FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER – Enter the four–digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four–digit number*(s)* from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY – For each **listed waste** entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each **characteristic** or **toxic contaminant** entered in column A estimate the total annual quantity of all the non–listed waste*(s)* that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:
   For listed hazardous waste: For each **listed** hazardous waste entered in column A select the code*(s)* from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non–listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code*(s)* from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non–listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code*(s)*.

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non–listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	[illegible] 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

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IV. DESCRIPTION OF HAZARDOUS WASTE (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE

EPA I.D. NO. (enter from page 1)

F	I	L	D	0	4	6	5	7	9	4	8	8	3 6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).* F6: A155

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground–level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).* F6: A156

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
45 05 ~~02 8~~ 28Ø	088 02 ØØØ

VIII. FACILITY OWNER

X A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below. ok

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
E ~~METHODE ELECTRONICS INCORPORATED~~ ok	~~312-392-3500~~ ok

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
H ~~1700 HICKS ROAD~~ ok	G ~~ROLLING MEADOWS~~	IL	~~60008~~ ok

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
M. G. Andre	M G Andre	11/14/80

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED

1500

Please print or type in the unshaded areas only
(fill—in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-R0175 96

FORM 1 GENERAL

EPA

U[illegible]NVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F | I L D 0 4 6 5 7 9 4 8 8 | T/A 3 | C D

LABEL ITEMS

II. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill—in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill—in area*(s)* below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of **bold—faced terms.**

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a **discharge** to **waters of the U.S.**? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge** to **waters of the U.S.**? (FORM 2B)		X	
C. Is this a facility which currently results in **discharges** to **waters of the U.S.** other than those described in A or B above? (FORM 2C)		X	
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a **discharge** to **waters of the U.S.**? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of **hazardous wastes**? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	X		
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)		X	
J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)		X	

III. NAME OF FACILITY

C 1 SKIP: METHODE ELECTRONICS INTRCNCT PROD DIVIS

IV. FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*	B. PHONE *(area code & no.)*
C 2: KOWALSKI PHILIP PROD SUPERVISR	312 392 3500

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

C 3: 1700 HICKS ROAD

B. CITY OR TOWN	C. STATE	D. ZIP CODE
C 4: ROLLING MEADOWS	IL	60008

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

C 5: 1700 HICKS ROAD

B. COUNTY NAME

COOK

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE *(if known)*
C 6: ROLLING MEADOWS	IL	60008	031

EPA Form 3510-1 (6-80)

CONTINUE ON REVERSE

NOV 14 1990

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
3643 (specify) Solvents from degreasing, acidic copper&tin bearing sludge-chem.milling	(specify)
C. THIRD	**D. FOURTH**
(specify)	(specify)

VIII. OPERATOR INFORMATION

A. NAME

METHODE ELECTRONICS INCORPORATED

B. Is the name listed in Item VIII-A also the owner? ☒ YES ☐ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL
S = STATE
P = PRIVATE
M = PUBLIC (other than federal or state)
O = OTHER (specify)

P (specify)

D. PHONE (area code & no.)

312 392 3500

E. STREET OR P.O. BOX

1700 HICKS ROAD

F. CITY OR TOWN

ROLLING MEADOWS

G. STATE IL

H. ZIP CODE 60008

IX. INDIAN LAND

Is the facility located on Indian lands? ☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water) — 9 N

D. PSD (Air Emissions from Proposed Sources) — 9 P

B. UIC (Underground Injection of Fluids) — 9 U

E. OTHER (specify) — 9 (specify)

C. RCRA (Hazardous Wastes) — 9 R

E. OTHER (specify) — 9 (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

F9: B/5¢

XII. NATURE OF BUSINESS (provide a brief description)

F9: A/5¢

Methode Electronics, Interconnect Products Division, produces electrical connecting systems, ranging in size from small plug-in connectors to large bus bars.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
M. G. Andre, Vice-President	M G Andre	11/14/80

COMMENTS FOR OFFICIAL USE ONLY

Please print or type in the unshaded areas only
(fill—in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004

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FORM 3 RCRA

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

S												T/A	C
F	I	L	D	0	4	6	5	7	9	4	8	3	1

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

[ ] 2. NEW FACILITY *(Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*: YR. 74 MO. 09 DAY 05

FOR NEW FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR IS EXPECTED TO BEGIN: YR. MO. DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[ ] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES — CODES AND DESIGN CAPACITIES

A. PROCESS CODE — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C).*

B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.

1. AMOUNT — Enter the amount.
2. UNIT OF MEASURE — For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below):* A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

S		T/A	C
C	DUP	3	1

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S02	600	G	
X-2	T03	20	E	
1	S01	1705000	G	
2				
3				
4				

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
5				
6				
7				
8				
9				
10				

Continued from the front.

III. PROCESSES *(continued)*

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES *(code "T04")*. FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. **EPA HAZARDOUS WASTE NUMBER** – Enter the four–digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four–digit number*(s)* from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. **ESTIMATED ANNUAL QUANTITY** – For each **listed waste** entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each **characteristic** or **toxic contaminant** entered in column A estimate the total annual quantity of all the non–listed waste*(s)* that will be handled which possess that characteristic or contaminant.

C. **UNIT OF MEASURE** – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. **PROCESSES**

1. PROCESS CODES:
   For listed hazardous waste: For each **listed** hazardous waste entered in column A select the code*(s)* from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non–listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code*(s)* from the list of process codes contained in Item III to indicate **all** the processes that will be used to store, treat, and/or dispose of all the non–listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code*(s)*.

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non–listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

Continued from page 2.
NOTE: Photocopy this page before completing i[f] have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)

W I L D 0 4 6 5 7 9 4 8 8 T/A 3 C 1

FOR OFFICIAL USE ONLY

W DUP T/A 3 C 2 DUP

V. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D 0 0 2	1 3 0 0 0 0 0 0	G	S 0 1	
2	U 2 2 6	8 2 5 0 0 0	G	S 0 1	
3	U 0 8 0	7 7 0 0 0 0	G	S 0 1	
4					
5					
6					
7					
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11					
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15					
16					
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20					
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22					
23					
24					
25					
26					

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

(enter "A", "B", "C", etc. behind the "3" to identify photocopied pages)

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTE (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 2.

EPA I.D. NO. (enter from page 1)

F | I L D 0 4 6 5 7 9 4 8 8 | T/A 3 | C 6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).* F6:A155

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground—level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).* F6:A156

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
45 05 ~~02~~ 28 ~~0~~	088 02 000

VIII. FACILITY OWNER

X A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below. ok

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
E ~~METHODE ELECTRONICS INCORPORATED~~ ok	~~312 392 3500~~ ok

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F ~~1700 HICKS ROAD~~ ok	G ~~ROLLING MEADOWS~~	~~IL~~	~~60008~~ ok

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
M. G. Andre		11/14/80

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED

IJOU

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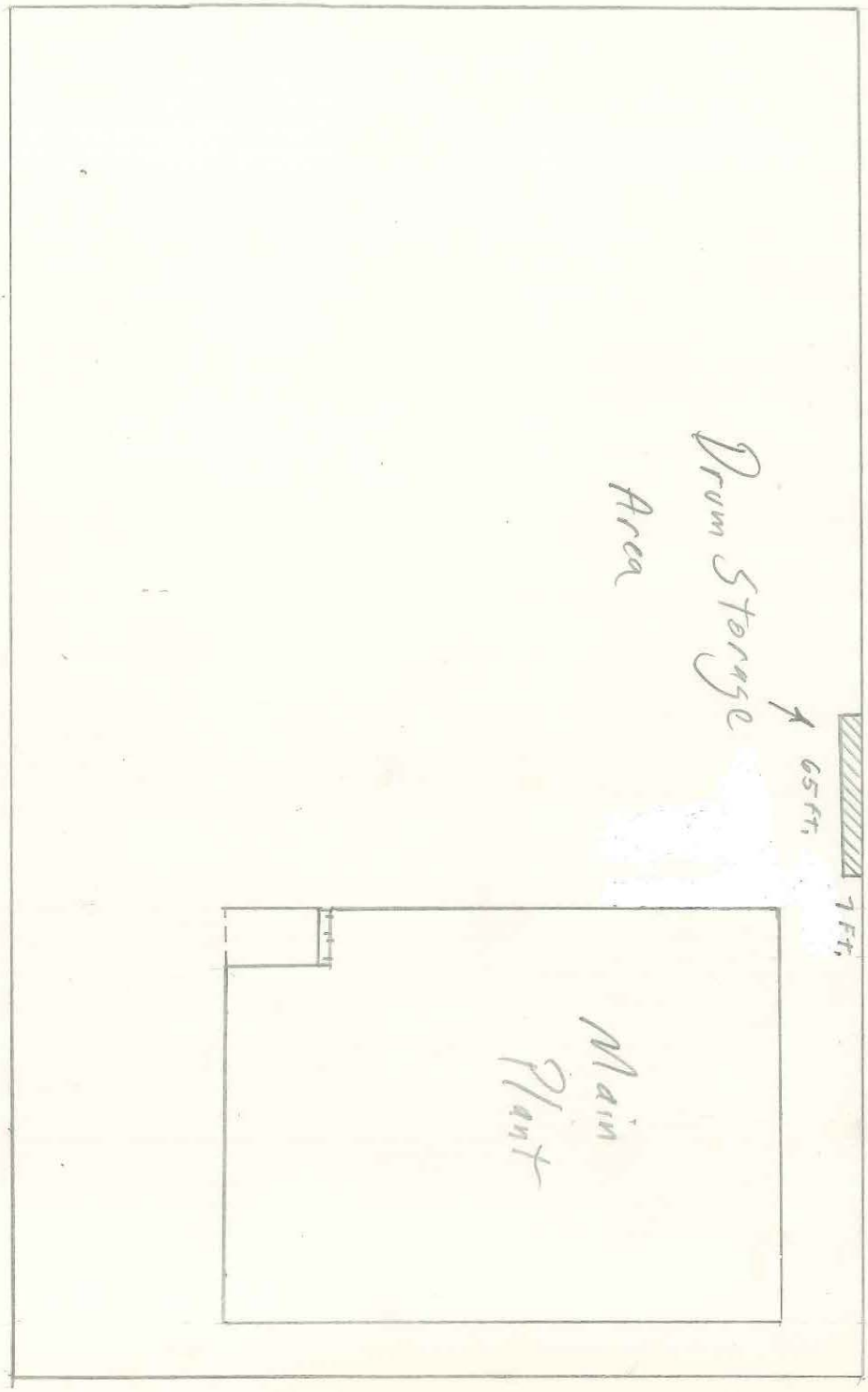
Form Approved OMB No. 158-S80004

V. FACILITY DRAWING *(see page 4)*

ILD046579488




BFT
BFT
BFT

ILD 046579458

AMENDATORY ENDORSEMENT POLLUTION LIABILITY

THE HARTFORD

This endorsement modifies such insurance as is afforded by the provisions of the policy relating to the following
COMPREHENSIVE GENERAL LIABILITY INSURANCE
COMPREHENSIVE — PLUS SPECIAL GENERAL LIABILITY INSURANCE
SMP LIABILITY INSURANCE

Premium for This Endorsement $ 145.00

Part I Separate Limits of Liability Endorsement (Hazardous Waste Facility)

It is agreed that:

1. The limits of liability stated in the Hazardous Waste Facility Pollution Liability Endorsement in Part II apply separately to such insurance as is afforded by the policy in connection with the insured's obligation to demonstrate financial responsibility at the facilities described therein.
2. Such limits of liability apply collectively to all such facilities (and not separately to each) and are in lieu of and not in addition to any other limits of liability stated elsewhere in the policy.
3. The "each occurrence" limit applies to all bodily injury and all property damage arising out of a single occurrence.
4. The annual "aggregate" limit applies to all damages because of all bodily injury and all property damage which occurs during the policy period.
5. For the purpose of determining the limit of the company's liability, all bodily injury and property damage arising out of a sudden and accidental discharge, dispersal, release or escape of irritants, contaminants or pollutants, including all bodily injury and property damage arising out of all subsequent exposure of persons or property to such substances, shall be considered as arising out of a single occurrence.
6. Part I of this endorsement shall be cancelled automatically by cancellation of the Hazardous Waste Facility Pollution Liability Endorsement in Part II.

Part II Hazardous Waste Facility Pollution Liability Endorsement

1. This endorsement certifies that the policy to which the endorsement is attached provides pollution liability insurance covering bodily injury and property damage in connection with the insured's obligation to demonstrate financial responsibility under 40 CFR 264.147 or 265.147. The coverage applies at: EPA Identification Number: 048608897
   Name: METHODE ELECTRONICS, INC.
   Address: 1 INDUSTRIAL PARK DR., WILLINGBORO, N.J.
   for sudden accidental occurrences. The limits of liability are $ 500,000. BI & 100,000 PD "each occurrence" and $ 600,000. annual aggregate, exclusive of legal defense costs.
2. The insurance afforded with respect to such occurrences is subject to all of the terms and conditions of the policy; provided, however, that any provisions of the policy inconsistent with subsections (a) through (e) of the Paragraph 2 are hereby amended to conform with subsections (a) through (e):
   (a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy to which this endorsement is attached.
   (b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer. This provision does not apply with respect to that amount of any deductible for which coverage is demonstrated as specified in 40 CFR 264.147(f) or 265.147(f).
   (c) Whenever requested by a Regional Administrator of the U.S. Environmental Protection Agency (EPA), the Insurer agrees to furnish to the Regional Administrator a signed duplicate original of the policy and all endorsements.
   (d) Cancellation of this endorsement, whether by the Insurer or the insured, will be effective only upon written notice and only after the expiration of sixty (60) days after a copy of such written notice is received by the Regional Administrators of the EPA Regions in which the facilities are located.
   (e) Any other termination of this endorsement will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Regional Administrators of the EPA Regions in which the facilities are located.

Attached to and forming part of Policy No. 83 C HP1603E
issued by HARTFORD ACCIDENT & INDEMNITY COMPANY, herein called the Insurer,
(Name of Insurer)
of 100 S. WACKER, CHICAGO, IL 60606 to METHODE ELECTRONICS, INC. ETAL
(Address of Insurer) (Name of Insured)
of 1700 HICKS RD., ROLLING MEADOWS, IL
(Address of Insured)
this 30 day of APRIL, 1983. The effective date of said policy is
30 day of APRIL, 19 83.

I hereby certify that the wording of this endorsement is identical to the wording specified in 40 CFR 264.151(i) as such regulation was constituted on the date first above written, and that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States.

RECEIVED
OCT 1983
WASTE MANAGEMENT BRANCH

(Signature of Authorized Representative of Insurer)
MARTHA DONOHOE
(Type Name)
CASUALTY MANAGER Authorized Representative of HARTFORD ACCIDENT AND INDEMNITY CO.
(Title) (Name of Insurer)
100 S. WACKER DR., CHICAGO, IL 60606
(Address of Representative)

Form L-4492-C Printed in U.S.A. (NS)

ATTACHMENT IA

THE HARTFORD

Named Insured and Address

Policy Number
3 C HP1603E

This endorsement forms a part of the policy as numbered above, issued by THE HARTFORD INSURANCE GROUP company designated therein, and takes effect as of the effective date of said policy unless another effective date is stated herein.

Effective Date — Effective hour is the same as stated in the Declarations of the policy.

Endt. No.

ATTACHMENT 1A

LOCATION	EPA IDENTIFICATION NUMBER
7444 W. WILSON AVE. CHICAGO, IL	0316000035
1700 HICKS RD. ROLLING MEADOWS, IL	0312730007

Nothing herein contained shall be held to vary, waive, alter, or extend any of the terms, conditions, agreements or declarations of the policy, other than as herein stated.

This endorsement shall not be binding unless countersigned by a duly authorized agent of the company; provided that if this endorsement takes effect as of the effective date of the policy and, at issue of said policy, forms a part thereof, countersignature on the declarations page of said policy by a duly authorized agent of the company shall constitute valid countersignature of this endorsement.

Countersigned by.....
Authorized Agent

B. Permit Application /Post Permit

P48b452553

Illinois Environmental Protection Agency · 2200 Churchill Road, Springfield, IL 62706

217/782-6761

Refer to: # 0312735007 -- Cook County
Methode Electronics, Inc.
ILD 046579488
RCRA - Permits

May 6, 1988

Methode Electronics, Inc.
1700 Hicks Road
Rolling Meadows, Illinois 60008

Attn: Environmental Coordinator or
Plant Manager

Dear Sir:

According to Agency files, your facility currently manages hazardous waste in containers and/or tanks subject to the requirements of 35 IAC 700-725. 35 IAC 703.157(f) states that interim status for any hazardous waste storage or treatment facility will be terminated November 8, 1992, unless the facility submits Part B of the RCRA permit application for these units to this Agency by November 8, 1988. This letter is written to (1) make you aware of this requirement and (2) describe the actions which must be taken in response to this requirement.

According to 35 IAC 703.157(f), if an existing facility desires to (1) store hazardous waste on-site for greater than ninety (90) days, (2) treat hazardous waste, or (3) store hazardous waste as a commercial facility after November 8, 1992, it must submit Part B of the RCRA permit application to this Agency by November 8, 1988. The information which must be contained in this application is described in 35 IAC 703, Subpart B. The enclosed document, entitled "RCRA Permit Guidance" provides more detail regarding the necessary contents of the application and also identifies several guidance documents which will be useful in developing the application. Also included in this document is the form which must be used when submitting the application.

If a facility does not desire to continue storing and/or treating hazardous waste after November 8, 1992, it must close the storage and/or treatment unit(s) present at the facility prior to this date. Closure, in this instance, basically means that all contamination must be removed from the unit(s) and if necessary, from the area surrounding these units. The requirements which must be met in closing these units are contained in 35 IAC 725, Subpart G. For you convenience, guidance for the development of a closure plan is contained in the enclosed document entitled "Instructions for the Preparation of Closure Plans for Interim Status RCRA Hazardous Waste Facilities." PLEASE NOTE THAT A CLOSURE PLAN DOES NOT NEED TO BE SUBMITTED AT THIS TIME. IT MUST HOWEVER, BE SUBMITTED TO THE AGENCY NO LATER THAN MAY 8, 1992.

In some instances, there may be several interim status hazardous waste management units at a facility. The facility may desire to pursue a final RCRA permit for a portion of these units and close the rest of them. Because of the uncertainty associated with this option, all interim status units at a facility must be included in Part B of the RCRA permit application, unless a closure plan for the units being closed is submitted with the Part B. If a closure plan is submitted with the Part B, the application need only address those units which will remain in operation.

The only alternatives available for hazardous waste treatment and storage facilities to meet the requirements of 35 IAC 703.157(f) are (1) submit Part B of the RCRA permit application by November 8, 1988 or (2) close by November 8, 1992. However, some facilities may have previously filed Part A of the RCRA permit application in error and now feel that the hazardous waste management activities carried out at the facility do not require a RCRA permit (i.e. the Part A was filed for protective measures). If this is the case, the Agency requests that information supporting this position be submitted no later than November 8, 1988. The Agency can then review the information submitted and correct its records accordingly. The information which must be submitted to make this demonstration is contained in the enclosed document entitled "Facility Part A Withdrawal Request Form."

Finally, some facilities may have closed or are currently closing in accordance with an IEPA approved closure plan. (Please bear in mind this letter is going out to over 200 facilities; some closed facilities may inadvertently receive this letter.) In this instance, the Agency requests that a copy of (1) the closure plan approval letter and (2) the letter from the Agency accepting the certifications of the owner/operator and the rgistered professional engineer that closure was carried out in accordance with the approved closure plan (if closure has been completed) be submitted by November 8, 1988. The Agency will again be able to review this information and correct its records accordingly.

Because of the large number of facilities subject to the requirements of 35 IAC 703.157(f), the Agency requests that all facilities receiving this letter complete the enclosed form entitled "RCRA Permit Information Form." The form has been developed such that it can be used by a facility falling into any of the five categories described above (pursuing a final permit, planning to close, pursuing a permit for only a portion of the interim status units and closing the other units, protective filers, closed in accordance with an IEPA approved closure plan). This form must be submitted to the Agency no later than November 8, 1988, along with all required attachments. Failure to do so may subject a facility to enforcement under State and/or Federal regulations and possible monetary penalties up to $25,000 per day of noncompliance.

The RCRA Permit Information Form and all required attachments must be submitted in triplicate (original and two (2) copies) to the following address:

Permit Section, RCRA Unit
Division of Land Pollution Control
Illinois Environmental Protection Agency
2200 Churchill Road
P.O. Box 19276
Springfield, IL 62794-9276

If you have any questions regarding this letter, please contact Jim Moore at 217/782-9875.

Very truly yours,

Lawrence H. Eastep, P.E., Manager
Permit Section
Division of Land Pollution Control

LHE:JKM:dks/1238j/1244j/1-3

Enclosures

cc: Division File
Compliance
Maywood Region
USPEA Region V

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

REPLY TO THE ATTENTION OF:

HRE-8J

April 21, 1993

Ms. Shari Swiger
Human Resources Manager
Methode Electronics, Inc.
1700 Hicks Road
Rolling Meadows, Illinois 60008

Re: Visual Site Inspection
Methode Electronics, Inc.
Rolling Meadows, Illinois
ILD 046 579 488

Dear Ms. Swiger:

The U.S. Environmental Protection Agency is enclosing a copy of the final Preliminary Assessment/Visual Site Inspection (PA/VSI) report for the referenced facility. The executive summary and conclusions and recommendations sections have been withheld as Enforcement Confidential.

If you have any questions, please call Francene Harris at (312) 886-2884.

Sincerely yours,

Kevin M. Pierard, Chief
Minnesota/Ohio Technical Enforcement Section
RCRA Enforcement Branch

U.S. Environmental Protection Agency
Office of Waste Programs Enforcement
Contract No. 68-W9-0006

TES 9

Technical Enforcement Support at Hazardous Waste Sites Zone III Regions 5,6, and 7

PRC
PRC Environmental Management, Inc.

PRC Environmental Management, Inc.
233 North Michigan Avenue
Suite 1621
Chicago, IL 60601
312-856-8700
Fax 312-938-0118

PRELIMINARY ASSESSMENT/ VISUAL SITE INSPECTION

METHODE ELECTRONICS INC. ROLLING MEADOWS, ILLINOIS ILD 046 579 488

FINAL REPORT

Prepared for

U.S. ENVIRONMENTAL PROTECTION AGENCY
Office of Waste Programs Enforcement
Washington, DC 20460

Work Assignment No.	:	C05087
EPA Region	:	5
Site No.	:	ILD 046 579 488
Date Prepared	:	March 26, 1993
Contract No.	:	68-W9-0006
PRC No.	:	009-C05087IL2Z
Prepared by	:	B&V Waste Science and Technology Corp. (John Noyes)
Contractor Project Manager	:	Shin Ahn
Telephone No.	:	(312) 856-8700
EPA Work Assignment Manager	:	Kevin Pierard
Telephone No.	:	(312) 886-4448

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EXECUTIVE SUMMARY

B&V Waste Science and Technology Corp. (BVWST) performed a preliminary assessment and visual site inspection (PA/VSI) to identify and assess the existence and likelihood of releases from solid waste management units (SWMU) and other areas of concern (AOC) at the Methode Electronics Inc. (Methode) facility in Rolling Meadows, Illinois. This summary highlights the results of the PA/VSI and the potential for releases of hazardous wastes or hazardous constituents from the SWMUs and AOCs identified. In addition, Attachment A contains a completed U.S. Environmental Protection Agency (EPA) Preliminary Assessment Form (EPA Form 2070-12) to assist in the prioritization of Resource Conservation and Recovery Act (RCRA) facilities for corrective action.

The Methode facility manufactures components for the electronics industry and formerly managed spent 1,1,1-trichloroethane; spent methylene chloride; spent formic acid; spent ferric chloride; and spent 329-stripper. The facility generates and manages the following waste streams: spent lubricant oils (nonhazardous), metal scrap (nonhazardous), spent tin/lead stripper (D002) and spent isopropyl alcohol (nonhazardous).

The facility, which has operated at its current location since 1962, occupies three acres in an industrial area located near a residential area. Approximately 200 people are employed at the Methode facility.

The facility's regulatory status is that of a treatment, storage or disposal facility. Methode has never filed for withdrawal of its Part A Permit Application, despite several communications from the Illinois Environmental Protection Agency (IEPA) indicating that it would be appropriate. The facility operates as a small-quantity generator.

The PA/VSI identified the following four SWMUs at the facility:

Solid Waste Management Units

1. Bus Bar Waste Storage Area.
2. Lubricant Waste Storage Area.
3. Metal Waste Storage Area.
4. Spent Tin Stripper and Spent Isopropyl Alcohol Storage Area.

No AOC was identified at the facility.

The potential for a release to ground water, surface water, air or soil is low for the bus bar waste storage area (SWMU 1). The unit did not store wastes for greater than 90 days. This unit has been inactive since 1989 and all wastes associated with the unit have been taken off site.

The potential for a release to ground water, surface water and air is low for the lubricant waste storage area (SWMU 2), but the potential for release to the soil is high. The unit is surrounded by approximately two feet of stained soil and stained concrete.

The potential for a release to ground water, surface water, air or soil is low for the metal waste storage area (SWMU 3) and the spent tin stripper and spent isopropyl alcohol storage area (SWMU 4). Both these SWMUs are indoors, on a sound concrete floor with no cracks or floor drains, and therefore pose little threat to the environment.

A municipal well is located approximately one-fourth mile west of the site. It taps deep aquifers and is part of a blended system involving three other wells, with all wells supplying an equal amount of water. Rolling Meadows receives its water supply from the City of Chicago, and Chicago receives its water supply from Lake Michigan. The system of wells is backup for the usual system. Private wells exist within a mile of the site, but it is unknown if these wells are used full time or as backup.

The facility's surface water runoff goes to Hicks Road. The storm sewers under Hicks Road drain to Salt Creek. Salt Creek, which is approximately one mile west of the facility, is the nearest surface water body.

The nearest residence is approximately one-fourth mile west of the site.

No sensitive environments are located on site, and the nearest wetland is approximately three-fourths of a mile north of the site.

BVWST recommends that Methode clean the soil and concrete around the lubricant waste storage area (SWMU 2), and implement secondary containment to decrease the potential for any future release to the soil.

1.0 INTRODUCTION

PRC Environmental Management, Inc., (PRC) received Work Assignment No. C05087 from the U.S. Environmental Protection Agency (EPA) under Contract No. 68-W9-0006 (TES 9) to conduct preliminary assessments (PA) and visual site inspections (VSI) of hazardous waste treatment and storage facilities in Region 5. As a team member with PRC under the TES 9 contract, B&V Waste Science and Technology Corp. (BVWST) conducted the PA/VSI for the Methode Electronics Inc. facility.

As part of the EPA Region 5 Environmental Priorities Initiative, the Resource Conservation and Recovery Act (RCRA) and Comprehensive Environmental Response Compensation and Liability Act (CERCLA) programs are working together to identify and address RCRA facilities that have a high priority for corrective action using applicable RCRA and CERCLA authorities. The PA/VSI is the first step in the process of prioritizing facilities for corrective action. Through the PA/VSI process, enough information is obtained to characterize a facility's actual or potential releases to the environment from solid waste management units (SWMU) and areas of concern (AOC).

A SWMU is defined as any discernible unit at a RCRA facility in which solid wastes have been placed and from which hazardous constituents might migrate, regardless of whether the unit was intended to manage solid or hazardous waste.

The SWMU definition includes the following:

- RCRA-regulated units, such as container storage areas, tanks, surface impoundments, waste piles, land treatment units, landfills, incinerators, and underground injection wells.
- Closed and abandoned units.
- Recycling units, wastewater treatment units, and other units that EPA has generally exempted from standards applicable to hazardous waste management units.
- Areas contaminated by routine and systematic releases of wastes or hazardous constituents. Such areas might include a wood preservative drippage area, a loading-unloading area, or an area where solvent used to wash large parts has continually dripped onto soils.

An AOC is defined as any area where a release to the environment of hazardous waste or constituents has occurred or is suspected to have occurred on a nonroutine and nonsystematic basis. This includes any area where such a release in the future is judged to be a strong possibility.

The purpose of the PA is as follows:

- Identify SWMUs and AOCs at the facility.
- Obtain information on the operational history of the facility.
- Obtain information on releases from any units at the facility.
- Identify data gaps and other informational needs to be filled during the VSI.

The PA generally includes review of all relevant documents and files located at state offices and the EPA Region 5 office in Chicago.

The purpose of the VSI is as follows:

- Identify SWMUs and AOCs not discovered during the PA.
- Identify releases not discovered during the PA.
- Provide a specific description of the environmental setting.
- Provide information on release pathways and the potential for releases to each medium.
- Confirm information obtained during the PA regarding operations, SWMUs, AOCs, and releases.

The VSI includes interviewing appropriate facility staff, inspecting the entire facility to identify all SWMUs and AOCs, photographing all visible SWMUs, identifying evidence of releases, initially identifying potential sampling parameters and locations, if needed, and obtaining all information necessary to complete the PA/VSI report.

This report documents the results of a PA/VSI of the Methode Electronics, Inc., (Methode) facility in Rolling Meadows, Illinois. The PA was completed on March 3, 1992. BVWST gathered

and reviewed information from the Illinois Environmental Protection Agency (IEPA) and from EPA Region 5 RCRA files. Additional sources of information include National Wetlands Inventory, United States Geological Survey (USGS) Topographic Map, United States Department of Agriculture (USDA), Federal Emergency Management Agency (FEMA), and Illinois State Water Survey (ISWS) well logs. The VSI was conducted on March 4, 1992 . It included interviews with Methode facility representatives and a walk-through inspection of the facility. Four SWMUs and no AOCs were identified at the facility.

Attachment A contains EPA Form 2070-12 completed by BVWST using information gathered during the PA/VSI. Attachment B summarizes the VSI and includes four inspection photographs. Attachment C contains field notes from the VSI.

2.0 FACILITY DESCRIPTION

This section describes the facility's location, past and present operations (including waste management practices), waste generating processes, history of documented releases, regulatory history, environmental setting, and receptors.

2.1 FACILITY LOCATION

The Methode facility is at 1700 Hicks Road in Rolling Meadows, Cook County, Illinois; (latitude 42° 05' 30" north and longitude 88° 02' 15" west) as shown in Figure 1. The facility occupies approximately three acres in an industrial area near a residential area.

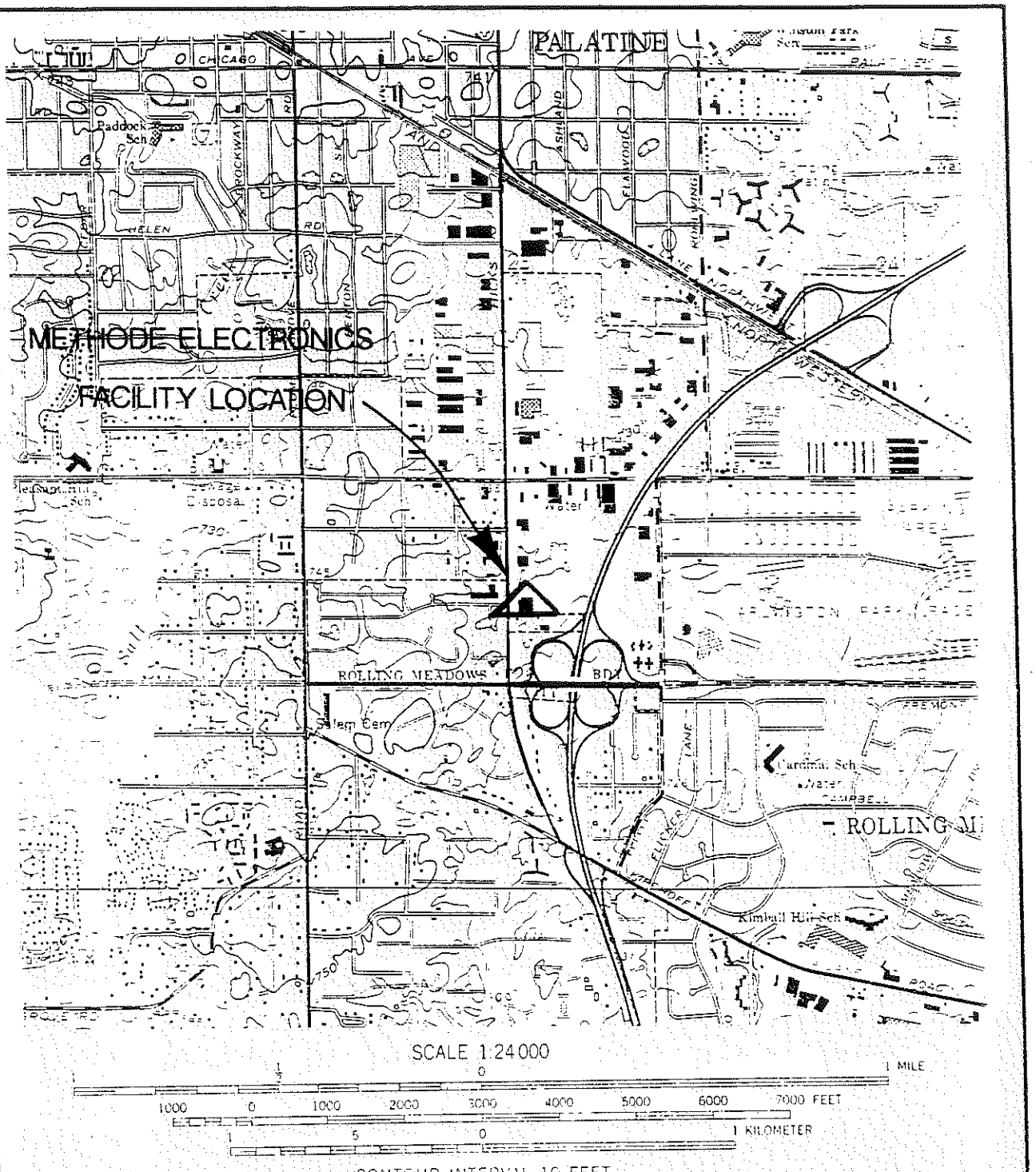
The Methode facility is bordered on the north by general offices, on the west by Hicks Road and general offices, on the south by Lighthouse Productions, and on the east by State Route 53 and Motel 6.

2.2 FACILITY OPERATIONS

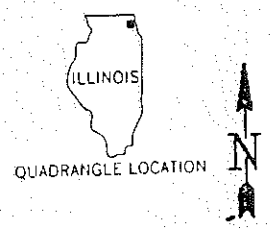
The Methode facility manufactures various components for the electronics industry, including connectors for computers. Connector production involves three processes: one to produce a metal component, one to produce a plastic component, and one to assemble the metal and plastic components.

The facility receives ribbons of various metals that are approximately two inches wide, a few millimeters thick, on rolls which are approximately two feet in diameter. The various metals used are: 172 beryllium copper, tin plated beryllium copper, 521 phosphorus bronze, tin plated phosphorus bronze, 260 brass, tin plated brass, alloy 688, tin plated alloy 688, alloy 510, tin plated alloy 510 and all of the above metals plated in gold. A single ribbon of metal is fed into one of approximately a dozen punch presses producing the metal component for either a male or female connector. The die on the punch press determines whether a male or female connector is produced. This process generates scrap metal wastes that are stored on site until being picked up for recycling.

Plastic chips are melted down to make the plastic component of the electronic connectors. Then, by injection molding, a plastic housing is produced that will be fitted with the metal



PALATINE QUADRANGLE
ILLINOIS–COOK CO.
7.5 MINUTE SERIES (TOPOGRAPHIC)
(USGS, 1980)



METHODE ELECTRONICS
ROLLING MEADOWS, ILLINOIS
FIGURE 1
FACILITY LOCATION

SCIENCE AND TECHNOLOGY CORP.

component. The plastic housings emerge from the injection molding attached to a plastic runner. The waste plastic runners are reground to be reused or thrown into the general trash.

The metal and plastic components are then assembled into electronic connectors. No wastes are generated during assembly of the connector components. Connectors are produced mainly on a demand basis. They are stored, packed in sealed boxes, in the stock room.

In the past Methode manufactured an electronic connector called the bus bar. The wastes that were associated with bus bar production prompted the submittal of a Part A permit. Bus bar production essentially consisted of laminating two copper plates together and then sealing the edges with an epoxy coating. Wastes produced by bus bar manufacturing were spent 1,1,1-trichloroethane; spent methylene chloride; spent formic acid; spent ferric chloride; and spent 329-stripper. In 1989 when bus bar production stopped, all associated wastes listed above were mobilized off site.

Methode uses a tin stripper and isopropyl alcohol to check the quality of metal plating on metal components of their electronic connectors. Very little waste tin stripper or spent isopropyl alcohol is produced; however, what is produced is kept in 55-gallon drums inside the facility.

The facility has operated at its current location since 1962 and employs about 200 people. The site has two buildings. One, an abandoned house, has not been used for at least ten years. The second structure is the Methode production building, which covers 47,000 square feet and contains all production, receiving, shipping and office space. There is a parking lot for employees.

The Methode facility has four solid waste management units. The bus bar waste storage area (SWMU 1) is no longer active. This unit managed 55-gallon drums of hazardous bus bar wastes. Ultimately wastes from this unit were mobilized off site for disposal. The lubricant waste storage area (SWMU 2) is active. This unit manages nonhazardous spent lubricant oils generated during routine oil changes of the punch presses. Spent lubricant oils are stored in 55-gallon drums on the unit until they are mobilized off site for recycling. The metal waste storage area (SWMU 3) is active. This unit manages nonhazardous metal scraps generated by the punch presses. The scrap metals accumulate in 55-gallon drums in this unit until they are mobilized off site for recycling. Finally, the spent tin stripper and spent isopropyl alcohol storage area (SWMU 4), manages small quantities of hazardous spent tin stripper and spent isopropyl alcohol.

The wastes are accumulated in separate 55-gallon drums. The facility had not yet generated a full drum of the wastes; therefore, they had not yet disposed of the wastes.

Table 1 identifies facility SWMUs. Figure 2 shows the facility layout, including SWMUs. Facility operations have remained constant since 1962. Prior to construction of the Methode facility in 1962, the site was an empty lot. The facility has been owned and operated by Methode since 1962.

2.3 WASTE GENERATING PROCESSES

The primary waste streams generated at the Methode facility are spent lubricant oils, metal scrap, spent tin stripper, and spent isopropyl alcohol. Spent lubricant oils are produced when an oil change is performed on the punch presses. The metal scrap is generated during the production of the electronic connectors. The spent tin stripper and spent isopropyl alcohol are produced during quality control of the electronic connectors. Wastes generated at the facility are discussed below and summarized in Table 2. Annual generation rates presented are based on 1991 waste generation data.

The nonhazardous spent lubricant oils are generated when an oil change is performed on the punch presses as part of general maintenance. This waste is accumulated in 55-gallon drums that are stored in SWMU 2, the lubricant waste storage area. About 500 gallons of this waste are generated annually. This waste is transported off site to a disposal/recycling facility by Dukes Oil of Bensenville, Illinois. Ultimately the lubricant waste is recycled through fuel blending.

Tin stripper and isopropyl alcohol are used for quality control purposes during production of the electronic connectors. Samples from the metal components are dipped in the stripper to check the quality of their metal coating. This waste is accumulated in SWMU 4, the spent tin stripper and spent isopropyl alcohol storage area. The hazardous component in the tin stripper is ammonium hydrogen fluoride, which makes up 30 percent of the formula. Hydrogen peroxide comprises less than eight percent of the formula (Chemelex, 1985). A 55-gallon drum is used to store the spent tin stripper and a 55-gallon drum is used to store the spent isopropyl alcohol. Small plastic boxes are used to handle the tin stripper and isopropyl alcohol. The plastic boxes are not thrown out, but constantly reused. There has not yet been enough of these wastes generated to fill the drums; therefore, ultimate disposal of these wastes is not yet known.

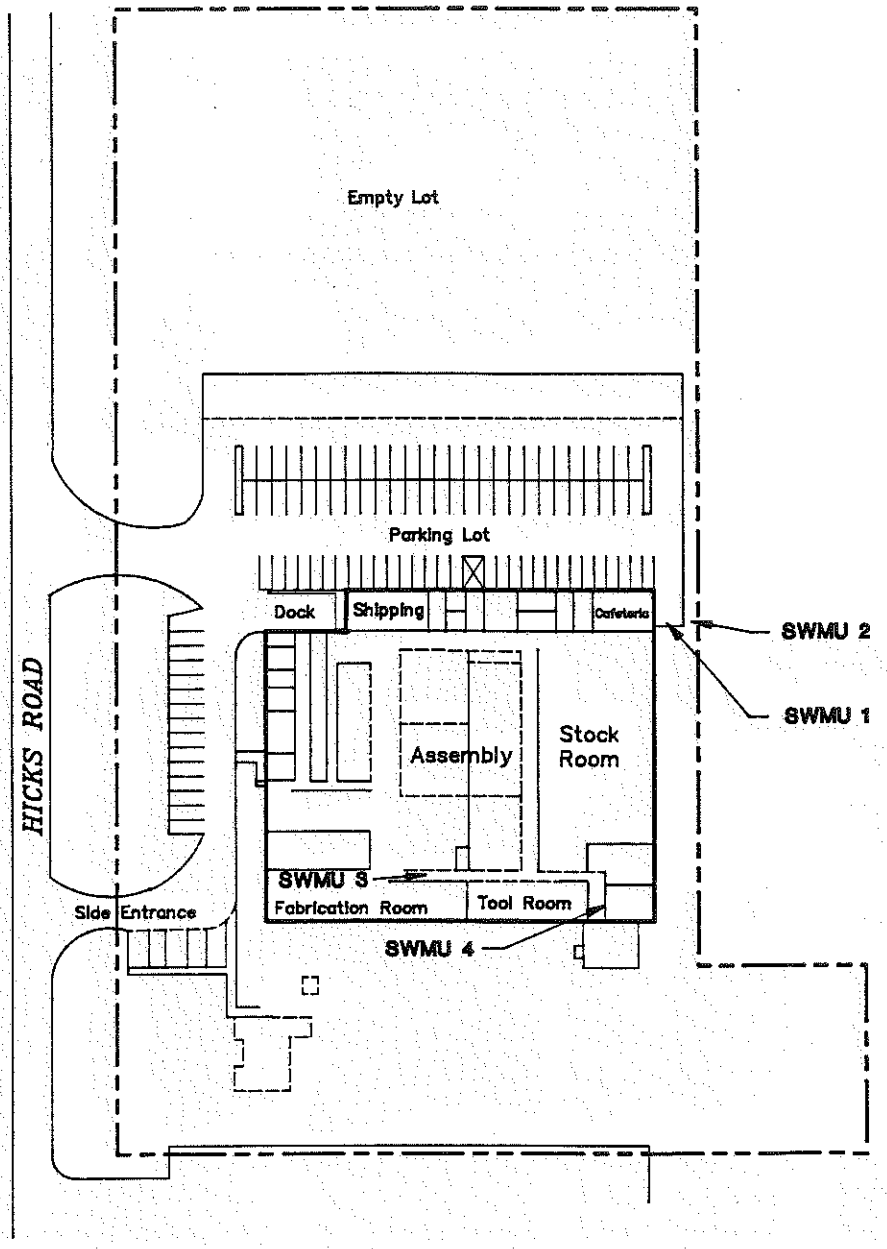
TABLE 1

SOLID WASTE MANAGEMENT UNITS (SWMU)

SWMU Number	SWMU Name	RCRA Hazardous Waste Management Unit *	Status
1	Bus Bar Waste Storage Area	Yes	Inactive, but not RCRA closed.
2	Lubricant Waste Storage Area	No	Active
3	Metal Waste Storage Area	No	Active
4	Spent Tin Stripper and Spent Isopropyl Alcohol Storage Area	No	Active

Note:

* A RCRA hazardous waste management unit is one that requires or formerly required submittal of a RCRA Part A or Part B permit application.



LEGEND

SWMU 1 BUS BAR WASTE STORAGE AREA

SWMU 2 LUBRICANT WASTE STORAGE AREA

SWMU 3 METAL WASTE STORAGE AREA

SWMU 4 SPENT STRIPPER AND SPENT ISOPROPYL ALCOHOL STORAGE AREA

NOT TO SCALE

METHODE ELECTRONICS INC.
ROLLING MEADOWS, ILLINOIS

FIGURE 2
FACILITY LAYOUT

PRC ENVIRONMENTAL MANAGEMENT, INC.

SOURCE: MODIFIED FROM METHODE ELECTRONICS, INC., 1991

METHODE.DWG - 3/24/93 - RAO - 009-005087L22

TABLE 2

SOLID WASTES

Waste/EPA Waste Code **	Source	Primary Management Unit*
Spent 1,1,1-Trichloroethane (F001)***	Bus Bar Production	SWMU 1
Spent Methylene Chloride (F001)***	Bus Bar Production	SWMU 1
Spent Formic Acid (D002)***	Bus Bar Production	SWMU 1
Spent Ferric Chloride (D002)***	Bus Bar Production	SWMU 1
Spent 329-Stripper (NA) ***	Bus Bar Production	SWMU 1
Spent Lubricant Oil (NA)	Punch Press Maintenance	SWMU 2
Metal Scrap (NA)	Electronic Connector Production	SWMU 3
Spent Tin Stripper (D002)	Quality Control	SWMU 4
Spent Isopropyl Alcohol (NA)	Quality Control	SWMU 4

Note:

* Primary management unit refers to a SWMU that manages or formerly managed the waste.

** Nonapplicable (NA) designates nonhazardous waste.

*** These wastes are no longer generated at the facility.

To make the metal component of the electronic connector, a ribbon of metal is fed into a punch press which produces the metal component for either a male or female connector. This process generates scrap metal. Metals that become scrap are: 172 beryllium copper, tin plated beryllium copper, 521 phosphorus bronze, tin plated phosphorus bronze, 260 brass, tin plated brass, alloy 688, tin plated alloy 688, alloy 510, tin plated alloy 510 and all of the above metals are plated in gold. Scrap metal is accumulated on site in SWMU 3, the metal waste storage area, until it is picked up for recycling by one of three different recyclers: RPS Metals in Franklin Park, Illinois; H. Diamond in Chicago, Illinois; and United Refining in Franklin Park, Illinois. About 143,000 pounds of this waste is generated annually.

Methode produced bus bars from 1968 until 1989. This process generated spent 1,1,1-trichloroethane (F001); spent methylene chloride (F001); spent formic acid (D002); spent ferric chloride (D002); and nonhazardous spent 329-stripper. It is not known how these wastes were generated. These wastes were collected in drums and stored in SWMU 1, the bus bar waste storage area. Wastes were stored for less than 90 days (Methode 1992). About 1,700 gallons of the bus bar waste were generated annually. The spent ferric chloride, spent 329-stripper, spent formic acid, and some spent methylene chloride were transported off site by Precision Energy Systems, Inc., and Ray Tech Transport to Nuclear Source and Services in Houston, Texas. The rest of the spent methylene chloride was transported off site by Chemical Waste Management (CWM) to CWM Chemical Services in Chicago, Illinois. The spent 1,1,1-trichloroethane was transported off site by Van Waters & Rogers, Inc., to Safety-Kleen in Dolton, Illinois. It is not known if the ultimate disposition was either recycling or incineration.

2.4 HISTORY OF DOCUMENTED RELEASES

This section discusses the history of documented releases to ground water, surface water, air, and on-site soils at the Methode facility.

There is no history of documented releases to ground water, surface water, air and on-site soils at the Methode facility. During the VSI, stained concrete and soil surrounding the lubricant waste storage area (SWMU 2) was noted. The staining appeared to be spilled lubricant oils. The approximate extent of staining was two feet wide around the drums both on the concrete pad and the nearby soil.

2.5 REGULATORY HISTORY

The Methode facility submitted a RCRA Part A permit application on November 14, 1980 (Methode, 1980). A RCRA notification of hazardous waste activity form was not uncovered during the PA. The Part A application listed the following process code and capacity: S01 (storage in containers) and 1,705 gallons. The application listed the following wastes: D002 (corrosive material - spent ferric chloride) 1,300 gallons per year; U226 (spent 1,1,1-trichloroethane) 825 gallons per year; and U080 (spent methylene chloride) 770 gallons per year.

In 1982 and again in 1986, IEPA notified Methode that inspectors found Methode to be a small-quantity generator (IEPA, 1982b; IEPA, 1986). Also, in a 1982 letter, IEPA recommended that Methode submit a Part A permit application withdrawal request (IEPA, 1982a). In 1988, Methode submitted a RCRA Permit Information form to the IEPA (Methode, 1988). In the form, Methode explained that they were a small-quantity generator and, therefore, did not need to apply for RCRA permits. The facility has never formally withdrawn its RCRA Part A Permit Application. Therefore, the bus bar waste storage area (SWMU 1) has not been formally closed. The facility currently operates as a small-quantity generator, storing wastes for less than 90 days; however, because its Part A Permit Application has not been withdrawn, its current status appears to be a treatment, storage, or disposal facility.

The facility is not required to have operating air permits or an National Pollutant Discharge Elimination System (NPDES) permit. Methode had an industrial wastewater discharge permit through the Metropolitan Water Reclamation District. The permit expired January 1991. The facility has no history of odor complaints from area residents.

2.6 ENVIRONMENTAL SETTING

This section describes the climate, flood plain and surface water, geology and soils, and ground water near the Methode facility.

2.6.1 Climate

The climate in Cook County is classified as humid continental type (USDA, 1979). The annual average daily maximum temperature is 58.7 °F and the annual average daily minimum temperature is 39.7 °F (NWB, 1991). The average precipitation from 1958 to 1990 was 33.3 inches

per year, and the greatest 24-hour rainfall was 9.3 inches in August 1987 (NWB, 1991). The overall wind direction varies seasonally with an average wind speed of 10.3 mph.

2.6.2 Flood Plain and Surface Water

The Methode facility is not in a 500-year flood plain (FEMA, 1985). The nearest surface water, Salt Creek, is approximately one mile west of the facility and discharges to the Des Plaines River.

Surface water drainage at the facility is to the west toward the storm sewers under Hicks Road. These storm sewers drain to Salt Creek (Village of Rolling Meadows, 1992).

2.6.3 Geology and Soils

Regional soil mapping by the U.S. Department of Agriculture (1979) classifies the near-surface soil at the Methode facility as a gently rolling to nearly level, moderately to poorly drained soil resulting from the weathering of a silty, clayey till.

Geology at the site is expected to be comprised of an unknown thickness of glacial deposits (lake-deposited clay, till, outwash) over Paleozoic sedimentary rock units. No site-specific information on the stratigraphy is presently available. However, a detailed statewide study by Berg and Kempton (1988) provides regional three-dimensional mapping of geologic materials to a depth of 50 feet. Their map suggests that the Methode vicinity is underlain by at least 50 feet of silty and clayey material. Berg and others (1984) rank aquifers in this vicinity with a low susceptibility to surface contamination because of fairly uniform till to a depth of at least 20 feet, with no evidence of sand interbeds.

Bedrock in the area is expected to be Silurian dolomite. The depth to bedrock, based on the mapping of Berg and Kempton (1988), is at least 50 feet.

2.6.4 Ground Water

No site-specific hydrogeologic information is available. Therefore, no statements may be made regarding the depth to the water table, or ground-water flow rates or flow directions.

In the northeastern Illinois region, ground water is obtained from four major aquifer systems: the glacial drift system, the shallow bedrock system, and two deep bedrock systems. They are distinguished by their hydrologic properties and recharge source areas (Hughes and others, 1966). In central Cook County, the glacial drift is thin and sand and gravel deposits are correspondingly thin or absent. Virtually all wells penetrate deep bedrock aquifers (Bergstrom and others, 1955).

The shallow bedrock aquifer system in northeastern Illinois underlies the glacial drift system and is mainly comprised of Silurian dolomite formations. The upper boundary of this system is the bedrock-drift contact, and the lower boundary is the Ordovician Maquoketa Shale. Water from this aquifer is obtained from fractures and solution openings in the Silurian dolomite beds (Hughes and others, 1966). In some areas, the shallow bedrock aquifer system receives some recharge from precipitation (Hughes and others, 1966).

The deep bedrock aquifer systems include the Cambrian-Ordovician aquifer system and the Mt. Simon aquifer system. The Cambrian-Ordovician aquifer system contains two major aquifers, the Glenwood-St. Peter aquifer and the Ironton-Galesville aquifer. The top of the Cambrian-Ordovician aquifer system is the Galena-Platteville Dolomite. The Glenwood-St. Peter aquifer is widely used where water requirements are less than 200 gallons per minute (gpm). This unit has a hydraulic conductivity between 9 and 15 gallons per day per square foot (gpd/sq.ft.). The Ironton-Galesville Sandstone aquifer has a hydraulic conductivity between 30 and 40 gpd/sq.ft. Recharge to the deep bedrock aquifer system is mostly from west and north of the six county metropolitan area, where rocks crop out at the surface or lie immediately below the glacial drift. Minor recharge occurs as leakage through the shallow bedrock aquifer system (Hughes and others, 1966).

The Mt. Simon aquifer is bounded above by the relatively impermeable shales and siltstones of the upper and middle Eau Claire Formation and below by pre-Cambrian basement rock. The average hydraulic conductivity of this aquifer is 16 gpd/sq.ft. (Hughes and others, 1966) and recharge is largely from the outcrop region of Cambrian rocks in south-central Wisconsin (Willman, 1971).

The Village of Rolling Meadows obtains their water for municipal and private supplies from the City of Chicago. The City of Chicago obtains its water from Lake Michigan. Ground water is used for an emergency backup supply. A municipal well is located approximately one-

fourth mile west of the facility. It draws from a deep aquifer and is part of a blended system. Three municipal wells supply the same amount of water to the system. Within one mile of the site there are approximately 22 private wells (ISWS, 1992). The depth, water-yielding interval(s), and present use of these wells are unknown.

2.7 RECEPTORS

The Methode facility occupies approximately three acres in an industrial area with a residential area nearby in Rolling Meadows, Illinois. Rolling Meadow has a population of about 22,600 (Village of Rolling Meadows, 1992).

The Methode facility is bordered on the north by general offices, on the west by general offices, on the south by Lighthouse Productions (which make videos); and on the east by State Route 53 and a Motel 6. Facility access is not controlled by any fencing or security guards. The building's weekend security system is operated by ADT Security Systems. Visitors to the facility have to check in with a receptionist.

The nearest surface water body, Salt Creek, is approximately one mile west of the facility and is used for recreational purposes.

Ground water is used in emergency situations as a public drinking water supply. The nearest drinking water well is located one-fourth mile west of the facility. It is not known if this well is upgradient or downgradient of the facility.

Sensitive environments are not located on site. The nearest wetland area is three-fourths of a mile north of the facility. It is a Palustrine open water (unknown bottom) permanent excavated wetland (USFWS, 1980).

3.0 SOLID WASTE MANAGEMENT UNITS

This section describes the four SWMUs identified during the PA/VSI. The following information is presented for each SWMU: description of the unit, dates of operation, wastes managed, release controls, history of documented releases, and BVWST observations. Figure 2 shows the SWMU locations.

SWMU 1	**Bus Bar Waste Storage Area**
Unit Description:	The bus bar waste storage area is a fenced, concrete pad. It is just outside the facility's east door behind the cafeteria. Its dimensions are approximately 5 by 10 feet. There are no floor drains in the pad. The unit's capacity is approximately 12 drums (Photograph No. 1).
Date of Startup:	This unit began operation in 1968.
Date of Closure:	The bus bar waste storage area has been inactive since 1989, when this facility stopped the production of bus bars.
Wastes Managed:	This unit managed drums of spent 1,1,1-trichloroethane (F001); spent methylene chloride (F001); spent formic acid (D002); spent ferric chloride (D002); and spent 329-stripper (nonhazardous). Wastes from this unit were stored for less than 90 days, picked up and either recycled for use somewhere else or disposed of.
Release Controls:	The unit is located outside. Drums were surrounded by a chain link fence and were underlain by a concrete pad with no drain. There was no secondary containment.
History of Documented Releases:	No releases from this SWMU have been documented.
Observations:	The unit is inactive. No evidence of release was noted.

SWMU 2	**Lubricant Waste Storage Area**
Unit Description:	The lubricant waste storage area is outside the facility's east door, behind the cafeteria. Its dimensions are approximately 3 by 10 feet. All the facility's lubricant oils are stored here on wooden skids. The spent lubricant oil is stored in 55-gallon drums. There are no floor drains in the pad. The unit's capacity was approximately eight drums (Photograph No. 2).
Date of Startup:	This unit began operations with the startup of the facility in 1962.
Date of Closure:	This unit is active.
Wastes Managed:	This unit manages nonhazardous waste lubricant oils from the facility's punch presses. Wastes from this unit are ultimately picked up for recycling by fuel blending.
Release Controls:	The unit has no release controls. All drums are stored on skids on a concrete pad.
History of Documented Releases:	No releases from the SWMU have been documented.
Observations:	During the VSI, the unit contained three 55-gallon drums of waste lubricant oil and three empty 55-gallon drums. Evidence of release was noted. A two-foot strip of soil and concrete surrounding the drums was stained with oil.
SWMU 3	**Metal Waste Storage Area**
Unit Description:	The metal waste storage area is on the east-west running aisle on the southern end of the building just outside the fabrication room. The unit is used to store scrap metal from the punch presses. The unit measures approximately 30 feet long and 3 feet wide. The unit contained approximately 10 55-gallon drums placed on skids lined

	up next to each other along the wall to the fabrication room (Photograph No. 3).
Date of Startup:	This unit began operations in 1962.
Date of Closure:	This unit is active.
Wastes Managed:	This unit manages metal scrap consisting of 172 beryllium copper, tin plated beryllium copper, 521 phosphorous bronze, tin plated phosphorous bronze, 260 brass, tin plated brass, alloy 688, tin plated alloy 688, alloy 510, tin plated alloy 510. Also all the above metal scrap is plated in gold, and finished assemblies contain plastic and metal. All metal scrap is kept in 55-gallon drums and placed on wooden skids. The scrap metal is picked up every two to three weeks for recycling; however, precious metals are picked up once every three months for recycling.
Release Controls:	The unit is indoors with no floor drains visible in the area.
History of Documented Releases:	No releases from this SWMU have been documented.
Observations:	The unit contained approximately 10 partially filled 55-gallon drums. All drums are kept open until they are full. No evidence of release was noted.
SWMU 4	**Spent Tin Stripper and Isopropyl Storage Area**
Unit Description:	The spent tin stripper and spent isopropyl alcohol storage area is indoors along the wall of the maintenance room. The unit stores tin stripper and isopropyl alcohol wastes that are produced from quality control processes. The unit contained two 55-gallon drums on a concrete floor. The unit has a two-drum capacity (Photograph No. 4).

Date of Startup:	This unit began operations in 1988.
Date of Closure:	This unit is active.
Wastes Managed:	This unit manages spent tin stripper, a peroxide-based tin and lead stripper. The hazardous ingredient of tin stripper is ammonium hydrogen fluoride (D002), and another ingredient is hydrogen peroxide. This unit, which also manages spent isopropyl alcohol, has not yet collected enough wastes to require disposal.
Release Controls:	The unit has no visible release controls.
History of Documented Releases:	No releases from this SWMU have been documented.
Observations:	The unit contained two half-full 55-gallon drums during the VSI. Both drums were closed and no cracks were visible on the floor. Approximately 18 to 20 feet away is a floor drain which discharges to the facility's sanitary sewer. No evidence of release was noted.

4.0 AREAS OF CONCERN

No AOCs were identified during the PA/VSI. The facility has no history of documented releases.

5.0 CONCLUSIONS AND RECOMMENDATIONS

The PA/VSI identified four SWMUs and no AOC at the Methode facility. Section 2.0 presents background information on the facility's location, operations, waste generating processes, history of documented releases, regulatory history, environmental setting, and receptors. Section 3.0 presents SWMU-specific information, such as the unit's description, dates of operation, wastes managed, release controls, history of documented releases, and observed conditions. BVWST's conclusions and recommendations for each SWMU follow. Table 3 summarizes the SWMUs at the Methode facility and recommended further actions.

SWMU 1 **Bus Bar Waste Storage Area**

Conclusions: The potential of a release to ground water, surface water, air, or soil is low. The SWMU is currently inactive but when it was active, there were no documented releases.

Recommendations: No further action is recommended.

SWMU 2 **Lubricant Waste Storage Area**

Conclusions: The potential of a release to ground water, surface water, or air is low; however, the potential of a release to soil is high. A release of spent lubricant oils was observed during the VSI. If the spent lubricant oils were to reach the water table in the unconsolidated deposits, any nearby residents whose wells are screened in the same units could be impacted.

Recommendations: A concrete and soil cleanup is recommended for SWMU 2. Implementation of secondary containment for SWMU 2 is strongly recommended to help prevent future releases.

SWMU 3 **Metal Waste Storage Area**

Conclusions: The potential of a release to ground water, surface water, air or soil is low. The SWMU is indoors and has no documented releases.

TABLE 3

SWMU SUMMARY

SWMU	Dates of Operation	Evidence of Release	Recommended Further Action
1. Bus Bar Waste Storage Area	1968 to 1989	None	None
2. Lubricant Waste Storage Area	1962 to present	Staining observed during the VSI	Concrete and soil cleanup and implementation of secondary containment
3. Metal Waste Storage Area	1962 to present	None	None
4. Spent Tin Stripper and Spent Isopropyl Alcohol Storage Area	1988 to present	None	None

Recommendation: No further action is recommended.

SWMU 4 **Spent Tin Stripper and Spent Isopropyl Alcohol Storage Area**

Conclusions: The potential of a release to ground water, surface water, air or soil is low. The SWMU is indoors and has no documented releases.

Recommendation: No further action is recommended.

REFERENCES

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ATTACHMENT A

EPA PRELIMINARY ASSESSMENT FORM 2070-12

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
IL	ILD 046 579 488

II. SITE NAME AND LOCATION

01 SITE NAME *(Legal, common, or descriptive name of site)*	02 STREET, ROUTE NO. OR SPECIFIC LOCATION IDENTIFIER				
Methode Electronics	1700 Hicks Road				
03 CITY	**04 STATE**	**05 ZIP CODE**	**06 COUNTY**	**07 COUNTY CODE**	**08 CONG DIST**
Rolling Meadows	IL	60008	Cook		
09 COORDINATES: LATITUDE	**LONGITUDE**				
42° 05' 30"	088° 02' 15"				

10 DIRECTIONS TO SITE *(Starting from nearest public road)*
From state road 53 go west on Euclid, first stoplight is Hicks Road, turn right onto Hicks Road going north, after 2 or 3 blocks site is on righthand side of road.

III. RESPONSIBLE PARTIES

01 OWNER *(If known)*	02 STREET *(Business, mailing residential)*		
William McGinley	7444 Wilson Avenue		
03 CITY	**04 STATE**	**05 ZIP CODE**	**06 TELEPHONE NUMBER**
Chicago	IL	60656	(708) 867-9600
07 OPERATOR *(If known and different from owner)*	**08 STREET** *(Business, mailing, residential)*		
William McGinley	7444 Wilson Avenue		
09 CITY	**10 STATE**	**11 ZIP CODE**	**12 TELEPHONE NUMBER**
Chicago	IL	60656	(708) 867-9600

13 TYPE OF OWNERSHIP *(Check one)*
☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency Name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER _____ (Specify) ☐ G. UNKNOWN

14. OWNER/OPERATOR NOTIFICATION ON FILE *(Check all that apply)*
☐ A. RCRA 3010 DATE RECEIVED: ___/___/___ (MONTH DAY YEAR) ☐ B. UNCONTROLLED WASTE SITE *(CERCLA 103 c)* DATE RECEIVED: ___/___/___ (MONTH DAY YEAR) ☒ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION BY *(Check all that apply)*
☒ YES DATE 3/4/92 ☐ A. EPA ☒ B. EPA CONTRACTOR ☐ C. STATE ☐ D. OTHER CONTRACTOR
☐ NO ☐ E. LOCAL HEALTH OFFICIAL ☐ F. OTHER: _____ (Specify)
CONTRACTOR NAME(S): B&V Waste Science and Technology Corp. (BVWST)

02 SITE STATUS *(Check one)*
☒ A. ACTIVE ☐ B. INACTIVE ☐ C.UNKNOWN

03 YEARS OF OPERATION
1962 (BEGINNING YEAR) | Present (ENDING YEAR) ☐ UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
Lubricant oil wastes; metal wastes; spent methylene chloride; spent 1,1,1-trichloroethane; spent formic acid; spent ferric chloride; spent isopropyl alcohol; spent strippers

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION
Low to no potential hazard to environment and/or population.

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION *(Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents.)*
☐ A. HIGH *(Inspection required promptly)* ☐ B. MEDIUM *(Inspection required)* ☐ C. LOW *(Inspect on time-available basis)* ☒ D. NONE *(No further action needed; complete current disposition form)*

VI. INFORMATION AVAILABLE FROM

01 CONTACT	02 OF *(Agency/Organization)*			03 TELEPHONE NUMBER
Kevin Pierard	U.S. EPA			(312) 886-4448
04 PERSON RESPONSIBLE FOR ASSESSMENT	**05 AGENCY**	**06 ORGANIZATION**	**07 TELEPHONE NUMBER**	**08 DATE**
John Noyes		BVWST	(312) 683-7829	3/23/92 (MONTH DAY YEAR)

ATTACHMENT B

VISUAL SITE INSPECTION SUMMARY AND PHOTOGRAPHS

VISUAL SITE INSPECTION SUMMARY

Methode Electronics Inc.
Rolling Meadows, Illinois
ILD 046 579 488

Date:	March 4, 1992
Facility Representatives:	Shari Swiger, Human Resources Manager Dave Stangle, Fabrication and Tooling Manager Mickey LaBay, Maintenance Technician
Inspection Team:	John Noyes, B&V Waste Science and Technology Corp.(BVWST) Stephen Mehay, BVWST
Photographer:	Stephen Mehay, BVWST
Weather Conditions:	Calm, sunny, temperature about 35 °F
Summary of Activities:	The visual site inspection (VSI) began at 9:00 a.m. with an introductory meeting. The inspection team discussed the purpose of the VSI and the agenda for the visit. Facility representatives then discussed the Methode Electronics Inc., (Methode) facility's past and current operations, solid wastes generated and release history. Methode representatives provided the inspection team with copies of documents requested. The VSI tour began at 10:06 a.m. SWMU 1 and SWMU 2, located just outside the facility's eastern rear door, were inspected first. SWMU 1 is inactive and has been removed, leaving only the flush cut steel fence posts in the concrete pad. During the tour, oil stained soil and concrete were visible in an approximate two-foot radius surrounding SWMU 2. SWMU 4 was inspected next; then SWMU 3 was inspected. Following the SWMU inspections, a general tour of the facility was given. The tour concluded at 10:42 a.m., after which the inspection team held an exit meeting with Shari Swiger. The VSI was completed and the team left the facility at 11:00 a.m.

Photograph No. 1 Location: SWMU 1
Orientation: North Date: March 4, 1992
Description: Location of bus bar waste storage area, when SWMU 1 was active.

Photograph No. 2 Location: SWMU 2
Orientation: North Date: March 4, 1992
Description: Three full and three empty drums of spent lubricant oil waiting to be picked up. Note stained cement pad and soil around drums.

Photograph No. 3
Orientation: West
Description: Metal waste storage area.

Location: SWMU 3
Date: March 4, 1992

Photograph No. 4
Orientation: South
Description: Spent tin strip and spent isopropyl alcohol storage area.

Location: SWMU 4
Date: March 4, 1992

ATTACHMENT C

VISUAL SITE INSPECTION FIELD NOTES

Methode Electronics

VSI Field Log Book

Project no. 45576.150

VSI Field Team: John Noyes
Steve Mehay

John Noyes 3-4-92

0900 Arrive on site and meet w/ Shari Swiger and explain exactly what we are doing.

0910 Began in 1962. Facility Bldg. was built for Methode Division of Chicago office. Make electronic connectors. Busbar manufacturing was performed here. Was classified as a metals finishing category by MWRD of Chicago, declassified september of '89, used an epoxy for coating. Generated wastes are: Isopropyl alcohol, peroxide based stripper (for tin/lead), Shari has MSDS sheets she said she would copy for us, these wastes are lab wastes and not necessarily production wastes - more Quality Control. Hi-T degreasol used in their rebuilding their dies - no waste produced.

John Noyes 3-4-92

John J Noyes 3-4-92

rags used to clean parts are recycled. Another waste is Oakite ruststripper used to clean plastic injection molds - used in tool room. Some plastic runners are thrown out while some is recycled. Metal scrap from plant is taken away by a scrap dealer - various types of metal are scrapped. Busbar wastes - 1,1,1 Tri-chloroethane, methylene chloride, formic acid stripper, 328 stripper - unregulated, Ferric Chloride. Needles used in the epoxy injection process were disposed of in medical waste buckets and thrown into the general trash from the facility - little if any epoxy is believed to be left behind as residue if it is they believe it turns hard and becomes inert.

John J Noyes 3-4-92

John J Noyes 3-4-92

Regulatory history of RCRA status - Part A permit was submitted yrs ago unknowingly (what it was) In 1983 a Request for withdrawal was submitted to the IEPA regarding the part A permit regarding Methode as a large quantity generator and in actuality Methode is a small quantity generator. In May 1988 Shari wrote the IEPA to ask to be deregulated regarding Part A and Part B permits, Shari is to make a copy for us of this letter along w/ MSDS sheets and waste hauling sheets. We requested maps and blueprints of the facility. Shari says this facility averages 200 employees. The bldg is 47,000 sq ft. Have an ADT security system only activated on weekends, no site fencing, three shifts. The nearest well is municipal and is on the corner of Hicks and

John J Noyes 3-4-92

John Moyer 3-4-92

Industrial avenue, water tower is present, Rolling Meadows municipal water. The nearest residence according to Stan is approximately 1-2 blocks away. Steve asked what happens to the site storm water and she said to ask this gentlemen we will meet.

1000 Mickey answered the storm water question. Drain pipes feed to are main drain which leads pipes underneath the street. Mickey gave us an internal map. A house sits on Methodes property, no longer a residence for approx 10yrs, currently no utilities to it.

1005 Left for tour of facility.

1006 outside behind cafeteria. Old and current drum storage area. Stan now mentioned that all lubricant wastes are stored here to be picked up by Dutes oil. Oil will sit till 100 drum

John Moyer 3-4-92

John Moyer 3-4-92

gallons is accumulated x 3-6 months sometimes less. Also seen metal drum scrap storage area. Currently all drums are empty.

1006 photo ① facing N drum storage area of old pad with old fence post holes visible.

photo ② facing N current oil drum storage area. empty (JMN 3-6-92, JMN)

photo ③ current scrap metal drum storage area

1010 ~~Oakite ruststripper products 215 gals~~ (JMN 3-4-92) aweek waste.

photo ④ oakite ruststripper parts degreaser which cleaned the die parts - no actual liquid

1015 waste only dirty rags which are picked up.

photo ⑤ metal scrap drum storage.

Mickey pointed out a home made compressor water degreaser. Compressor water is filtered through the recycling rags and then put in a floor drain.

John Moyer 3-4-92

John Noyes 3-4-92

⑥ photo facing west punch press and lubricants

⑦ Tin strip and Isopropyl alcohol storage waste

⑧ Injection molding runners scrap.

1030 were shown how RIT dye is used to dye plastic parts. Neighboring facilities are lighthouse productions who make videos for businesses to the south, general JH offices are to the North and west to the east across RT 53 is a Motel ⑥

1042 Shari is head of personnel. The two other people who escorted us on tour of the facility was Mickey LaBay Maintance Technician, Dave Stagle Fabrication and Tooling manager.

1045 Shari gave us the copies we requested.

1100 Left facility.

John J Noyes 3-4-92

NF

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

REPLY TO THE ATTENTION OF:

February 21, 1992 HRE-8J

Mr. Robert Kuehnau
Methode Electronics, Inc.
7444 West Wilson Avenue
Chicago, Illinois 60656

Re: Visual Site Inspection
Methode Electronics, Inc.
Chicago, Illinois
ILD 046 579 488

Dear Mr. Kuehnau:

The United States Environmental Protection Agency (U.S. EPA) Region V will conduct a Preliminary Assessment including a Visual Site Inspection (PA/VSI) at the referenced facility. This inspection is conducted pursuant to the Resource Conservation and Recovery Act, as amended (RCRA) Section 3007 and the Comprehensive Environmental Response, Compensation, and Liability Act, as amended (CERCLA) Section 104 (e). The referenced facility has generated, treated, stored, or disposed of hazardous waste subject to RCRA. The PA/VSI requires identification and systematic review of all solid waste streams at the facility. The objective of the PA/VSI is to determine whether or not releases of hazardous wastes or hazardous constituents have occurred or are occurring at the facility which may require further investigation. This analysis will also provide information to establish priorities for addressing any confirmed releases.

The visual site inspection of your facility is to verify the location of all solid waste management units (SWMUs) and areas of concern (AOCs), and to make a cursory determination of their condition by visual observation. The definitions of SWMUs and AOCs are included in Attachment 1. The VSI supplements and updates data gathered during a preliminary file review. During this site inspection, no samples will be taken. A sampling visit to ascertain if releases of hazardous waste or constituents have occurred may be required at a later date.

Assistance of some of your personnel may be required in reviewing solid waste flow(s) or previous disposal practices. The site inspection is to provide a technical understanding of the present and past waste flows and handling, treatment, storage, and disposal practices. Photographs

ATTACHMENT 1

The definitions of solid waste management unit (SWMU) and area of concern (AOC) are as follows:

A SWMU is defined as any discernable unit where solid wastes have been placed at any time from which hazardous constituents might migrate, regardless of whether the unit was intended for the management of a solid or hazardous waste.

The SWMU definition includes the following:

- RCRA regulated units, such as container storage areas, tanks, surface impoundments, waste piles, land treatment units, landfills, incinerators, and underground injection wells
- Closed and abandoned units
- Recycling units, wastewater treatment units, and other units that U.S. Environmental Protection Agency has generally exempted from standards applicable to hazardous waste management units
- Areas contaminated by routine and systematic releases of wastes or hazardous constituents, such as wood preservative treatment dripping areas, loading or unloading areas, or solvent washing areas

An AOC is defined as any area where a release to the environment of hazardous wastes or constituents has occurred or is suspected to have occurred on a nonroutine or nonsystematic basis. This includes any area where such a release in the future is judged to be a strong possibility.

NF

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Assistance of some of your personnel may be required in reviewing solid waste flow(s) or previous disposal practices. The site inspection is to provide a technical understanding of the present and past waste flows and handling, treatment, storage, and disposal practices. Photographs

of the facility are necessary to document the condition of the units at the facility and the waste management practices used.

The VSI has been scheduled for March 4, 1992 at 9:00 a.m. The inspection team will consist of personnel of B&V Waste Science & Technology Corp., a contractor for the U.S. EPA. Representatives of the Illinois Environmental Protection Agency (IEPA) may also be present. Your cooperation in admitting and assisting them while on site is appreciated.

The U.S. EPA recommends that personnel who are familiar with present and past manufacturing and waste management activities be available during the VSI. Access to any relevant maps, diagrams, hydrogeologic reports, environmental assessment reports, sampling data sheets, environmental permits (air, NPDES), manifests and/or correspondence is also necessary, as such information is needed to complete the PA/VSI.

If you have any questions, please contact me at (312) 886-4448 or Francine Harris at (312) 886-2884. A copy of the Preliminary Assessment/Visual Site Inspection Report, excluding the conclusions and Executive Summary portion will be sent when the report is available.

Sincerely yours,

Francine M. Harris

Kevin M. Pierard, Chief
OH/MN Technical Enforcement Section

Attachment

cc: Larry Eastep, IEPA, Springfield
Gliff Gould, IEPA, Maywood

meth-1/rfa

ATTACHMENT 1

The definitions of solid waste management unit (SWMU) and area of concern (AOC) are as follows:

A SWMU is defined as any discernable unit where solid wastes have been placed at any time from which hazardous constituents might migrate, regardless of whether the unit was intended for the management of a solid or hazardous waste.

The SWMU definition includes the following:

- RCRA regulated units, such as container storage areas, tanks, surface impoundments, waste piles, land treatment units, landfills, incinerators, and underground injection wells
- Closed and abandoned units
- Recycling units, wastewater treatment units, and other units that U.S. Environmental Protection Agency has generally exempted from standards applicable to hazardous waste management units
- Areas contaminated by routine and systematic releases of wastes or hazardous constituents, such as wood preservative treatment dripping areas, loading or unloading areas, or solvent washing areas

An AOC is defined as any area where a release to the environment of hazardous wastes or constituents has occurred or is suspected to have occurred on a nonroutine or nonsystematic basis. This includes any area where such a release in the future is judged to be a strong possibility.

ILLINOIS EPA
Environmental Protection Agency
176 S. First Street Maywood, IL. 60153

777

312/345-9780

Refer to: General - Cook County - Rolling Meadows/Methode Electronics, Inc.
ILD046579488

April 19, 1982

Mr. Philip Kowalski
Methode Electronics, Inc.
1700 Hicks Road
Rolling Meadows, Illinois 60008

Methode Electronics, Inc.
7447 W. Wilson
Chicago, Illinois 60656

Dear Mr. Kowalski:

On March 16, 1982, representatives of tne Illinois Environmental Protection Agency inspected your facility. This inspection was conducted by the Illinois Environmental Protection Agency under a Cooperative Arrangement with, and authorization of, the United States Environmental Protection Agency (USEPA). The purpose of this inspection was to determine your facility's compliance status with the Resource Conservation and Recovery Act of 1976, P.L. 94-580, as amended.

The inspectors found that you are a small quantity generator. Therefore, if you comply with the requirements of 40 CFR 261.5 you will be exempt from the other regulations under Parts 262 through 265, Parts 122 through 124 and the notification requirements of Section 3010 of RCRA. Should your status change in the future, please be advised that you would have to comply with Part 262 Standards Applicable to Generators of Hazardous Waste published in the Federal Register, Vol. 45, No. 98, on May 19, 1980, as amended.

Please confirm in a letter to us, within 15 days after receipt of this letter, whether you qualify under the special requirements for hazardous waste generated by small quantity generators under the provision of 40 CFR 261.5. Please send such documentation to Mr. Kenneth P. Bechely at the above address.

In addition, since your facility is not regulated as a hazardous waste storage facility under RCRA, we recommend that you submit a letter to the Illinois Environmental Protection Agency at the above address requesting that your EPA Form 3510 be withdrawn. A copy of this letter should be sent to USEPA Region V, RCRA Activities, P.O. Box 7861, Chicago, Illinois 60680.

Your cooperation and efforts in this matter are appreciated. Should you have any questions about the report or letter, please contact Glenn Sternard of my staff at the above number.

Sincerely,

Kenneth P. Bechely (mws)

Kennech P. Bechely, Northern Region Manager
Field Operations Section
Division of Land/Noise Pollution Control

KPB:GJS:prb

Enclosure: Inspection Report

cc: Division File
Nortnern Region
U.S. E.P.A. - Region V

ILLINOIS EPA ILLINOIS ENVIRONMENTAL PROTECTION AGENCY

MEMORANDUM

TO: Division File DATE: 03-[illegible]

FROM: Glenn Sternard ☐ Information only

SUBJECT: Rolling Meadows / Methode Electronics, Inc ☐ Response requested

The Methode facility in Rolling Meadows manufactures electrical connecting systems. These components range from small plug-in type connectors to large "bus" bars. From manufacturing processes hazardous waste is generated in the facility. These wastes are 111 trichloroethane and di chloromethane. These solvents are used in degreasing of parts & also delamination of epoxy bonded components.

Also generated is ferric chloride from printed circuit board etching.

Mr Kowalski estimates that the generation of ferric chloride is ≈ 10 / 55 gal drums / yr., ≈ 2 drums 111 trichloro[illegible] and 4 drums Methylene chloride (dichloromethane). Present generation rates will qualify Methode / Rolling Meadows facility for exclusion under the small quantity generator provision. Mr Kowalski further mentioned that the company would like to withdraw their 3510 storage permit application, as wastes will be removed within 90 days as allowed.

The ferric chloride was being sent to Circuit Board Supply (395-[illegible]) in Bensenville IL. However this waste was not being manifested. Mr Kowalski stated that a permit would be obtained for this waste stream. (C.B.S. is also known as Triad's Etchants)

The facility should be deleted as a storage / generator and considered a small quantity generator.

STATE IDENTIFICATION NUMBER
(If Applicable)

ILD046579488
EPA IDENTIFICATION NUMBER

RCRA INSPECTION REPORT - INTERIM STATUS STANDARDS
TREATMENT, STORAGE, AND DISPOSAL FACILITIES
Form A - General Facility Standards

I. General Information:

(A) Facility Name: Methode Electronics, Inc

(B) Street: 1700 Hicks Rd

(C) City: Rolling Meadows (D) State: IL (E) Zip Code: 60008

(F) Phone: @ (312) 392-3500 (G) County: Cook

(H) Operator: SAME AS ABOVE

(I) Street:

(J) City: (K) State: (L) Zip Code

(M) Phone: (N) County:

(O) Owner: METHODE ELECTRONICS, Inc

(P) Street: 7447 W. Wilson Ave

(Q) City: Chicago (R) State: IL (S) Zip Code: 60656

(T) Phone: (312) 867-9600 (U) County: Cook

(V) Date of Inspection: 3-16-82 (W) Time of Inspection (From) 1:45p (To) 2:30

(X) Weather Conditions: Sunny 50°F

Rev. 3-6-81/J.B.

Inspection consists of pgs 1, 2, & 24 of Form A.

(Y) Person(s) Interviewed	Title	Telephone
Philip Kowalski	Prod. Sup.	(812) 392-3500

(Z) Inspection Participants	Agency/Title	Telephone
glenn Sternard	IEPA/EPS	(312) 345-9780

(AA) Preparer Information

Name	Agency/Title	Telephone
glenn Sternard	IEPA/EPS	(312) 345-9780

II. SITE ACTIVITY:

Complete sections I through VII for all treatment, storage, and/or disposal facilities. Complete the forms (in parenthesis) in section VIII corresponding to the site activities identified below:

N/A A. Storage and/or Treatment
1. Containers (I)
2. Tanks (J)
3. Surface Impoundments (K)
4. Waste Piles (L)

___B. Land Treatment (M)

___C. Landfills (N)

___D. Incineration and/or Thermal Treatment (O and P)

___E. Chemical, Physical, and Biological Treatment (Q)

Note: If facility is also a generator or transporter of hazardous waste complete sections IX and X of this form as appropriate.

REMARKS

Use this section to briefly describe site activities observed at the time of the inspection. Note any possible violations of Interim Status Standards.

The site activity of this Methode facility is the manufacture of electrical connection systems. The components produced include plug-in variety connectors and "bus" bars which eliminate wire harnesses. These components are used in computers and military equipment. HAZARDOUS WASTE is generated from degreasing, delaminating, and circuit-board etching procedures. The waste streams are 1,1,1, trichlorethane, Methylene chloride, and Ferric Chloride respectively. The delamination refered to is the dissolving of epoxy used to bond various parts together.

The estimated annual quantites are as follows Ferric Chlorid 5000 g/yr. 1,1,1, Trichlor - 120 gal/yr and 200 gal/yr. Methylene Chloride. These rates would qualify Methode for exclusion under the small quantity provision. The facility would also like to withdraw Form 3510 STORAGE Permit application as all material will be removed within the 90 day time limit.

Drums at the facility are accumulated outside the facility and are on a non-paved (gravel) surface. The Ferric Chloride was not manifested and is being sent to Circuit Board supply in Bensenville Il. Company Representative agreed to obtain a permit & manifest the Ferric Chloride to this site.

Methode Electronics should be reclassified as a small quantity generator and withdraw their application for hazardous waste STORAGE. (Form 3510).

UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY
REGION V
111 West Jackson Blvd.
CHICAGO, ILLINOIS 60604

AUG 17 1982

REPLY TO ATTENTION OF:

RCRA ACTIVITIES

Mr. Philip Kowalski, Production Supervisor
Methode Electronics Incorporated
1700 Hicks Road
Rolling Meadows, Illinois 60008

RE: Request for Information--Hazardous Waste Permit Review (Small Quantity Generator)
FACILITY: NAME: Methode Electronics Incorporated
USEPA ID NO.: ILD 046 579 488

Dear Mr. Kowalski:

This is to acknowledge that the United States Environmental Protection Agency has completed reviewing your Part A Hazardous Waste Permit Application. Our review indicates your facility may not require a permit under §3005 of the Resource Conservation and Recovery Act; however, further clarification is needed.

Based on the information submitted, your facility appears to qualify for the small quantity generator exclusion as defined in 40 CFR Part 261.5 (enclosed). Please review these requirements to determine if your facility qualifies for the small quantity generator exclusion from November 19, 1980, to the present. If it does, a permit is not required, and you should withdraw your permit application. Please submit your determination in writing, signed and certified by an authorized person in accordance with 40 CFR Part 122.6 (enclosed), requesting that your application be withdrawn. If at any time, since November 19, 1980, your operation (1) did not qualify for the special requirements for generators, of small quantities of hazardous wastes, and (2) included treatment, storage, or disposal of hazardous waste subject to 40 CFR Part 265, a closure plan must be filed with the withdrawal request. Requirements for closure are found at 40 CFR Part 265 Subpart G.

If your review indicates that a permit is required, but certain information on your application is incorrect, please submit a revised Part A with the appropriate changes to this Regional Office. If no response is received in this office within 30 days, we will assume your facility requires a permit. Accordingly, we will continue to process your application.

If you have any questions, please do not hesitate to contact the Technical, Permits, and Compliance Section at (312) 353-2197 for assistance. Please refer to "Request for Information--Small Quantity Generator," in all telephone contacts and correspondence on this matter.

Sincerely, yours,

Karl J. Klepitsch, Jr., Chief
Waste Management Branch

Enclosures

cc: Mr. M. G. Andre, Vice President

EK
OIC
8/17/82

Environmental Protection Agency
1701 S. First Street Maywood, IL. 60153

312/345-9780

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Sincerely,

Kenneth P. Bechely (mws)

Kennech P. Bechely, Northern Region Manager
Field Operations Section
Division of Land/Noise Pollution Control

KPB:GJS:prb

Enclosure: Inspection Report

cc: Division File
Northern Region
U.S. E.P.A. - Region V